

South Dakota Medicaid EHR Incentive Payment Program

# Eligible Professionals Meaningful Use Stage 1

User Guide

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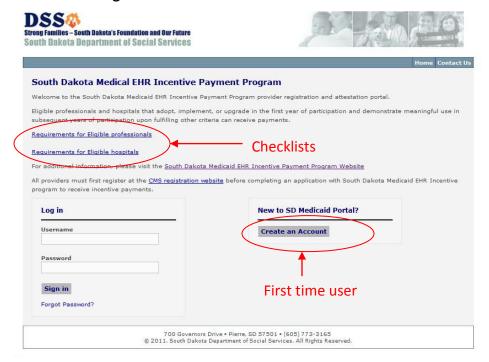
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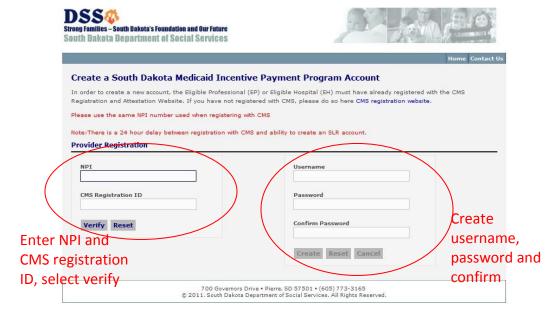
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# **South Dakota Medicaid EHR Incentive Payment Program Registration Steps for Eligible Professionals**

1. Welcome Page: Account creation





Applying for incentive payments:

o Enter the url for the South Dakota Medicaid **EHR Incentive** Program website

http://www.medicaidehr incentives.sd.

- First time users, create an account by entering the NPI and CMS registration ID. You can then create a User name and password
- Note: Providers must first register at CMS registration and attestation system. Providers must allow 1-2 business days after initially registering at the CMS site before log in to the SD attestation portal
- o Follow the steps in the following pages to attest to the South Dakota Medicaid EHR Incentive Payment Program

## 1.2 Log in

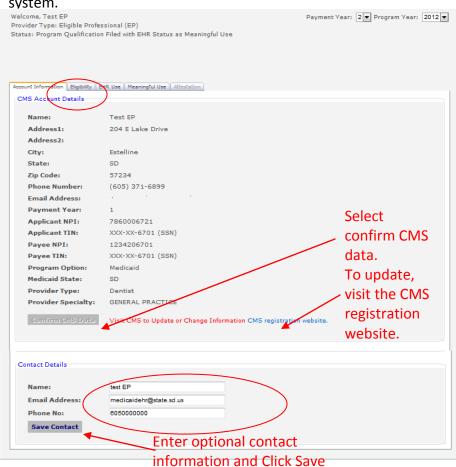




- o If you already have a username and password, you will enter it on this screen and click sign in.
- Click "Forgot Password" if you do not remember your password. You will be asked for your NPI for validation.

## 2. Registration Confirmation

Confirm registration. To update or modify the registration information, providers will need to visit the CMS EHR Incentive program registration and attestation system.



- o This is the information that was entered at the CMS Registration & Attestation site. Confirm this information if it is correct. If it is incorrect, you will need to return to the CMS site to update your information.
- o If the contact person for this registration is different from the person listed in the CMS Account Details, enter it here.
- You are now able to move to the **Eligibility Tab**

#### 3. Eligibility

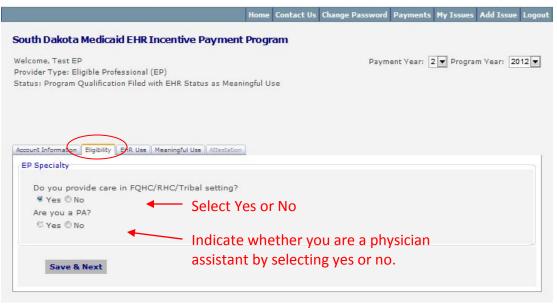
## Eligibility for a provider in an FQHC/RHC/Tribal.

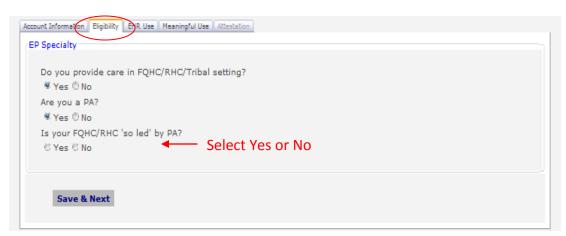




 The questions on this screen are required fields that must be answered.

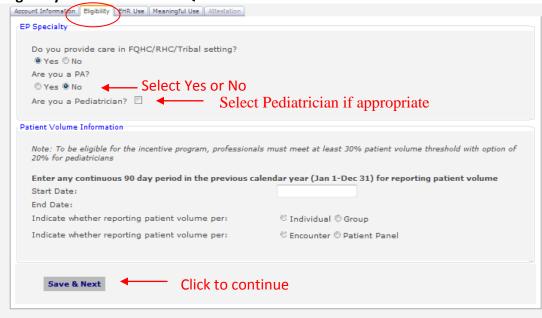
 Your answers here will determine which questions will appear next.





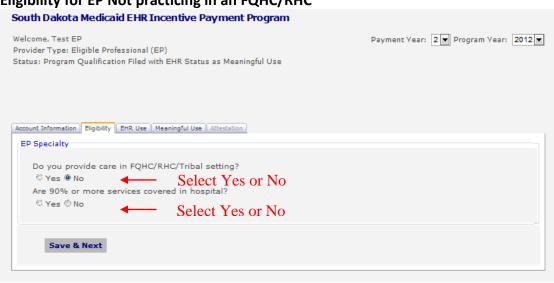
- If you are a PA providing care in an FQHC/RHC, the FQHC/RHC must be "so led" by a PA.
- Select the appropriate box to determine which "so led" criteria is met.
- After selection is made, click save.
   This will allow you to go to the patient volume information

## Eligibility for Non PA in an FQHC or RHC



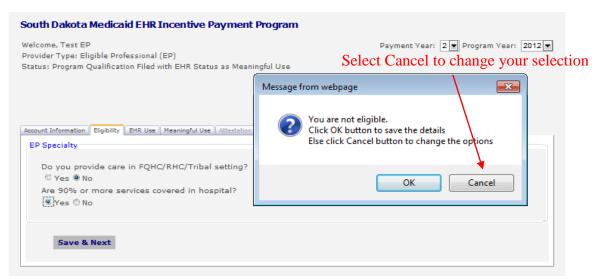
- o If you provide care in an FQHC/RHC and are not a PA, select no and the pediatrician question becomes available.
- You can now continue to the Patient Volume Information.

## Eligibility for EP Not practicing in an FQHC/RHC

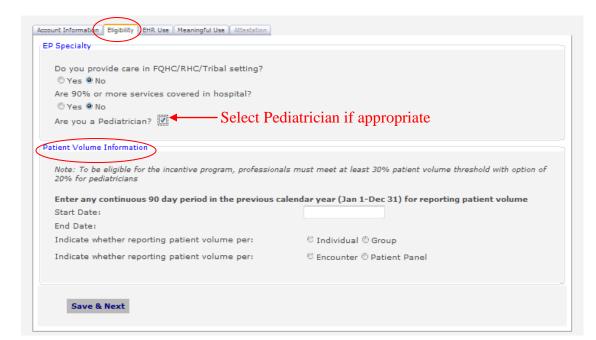


o Do you provide 90% or more of your services in a hospital setting? Select Yes or no

o If 90% or more of an EP's services are covered in a hospital, they are not eligible for the program.

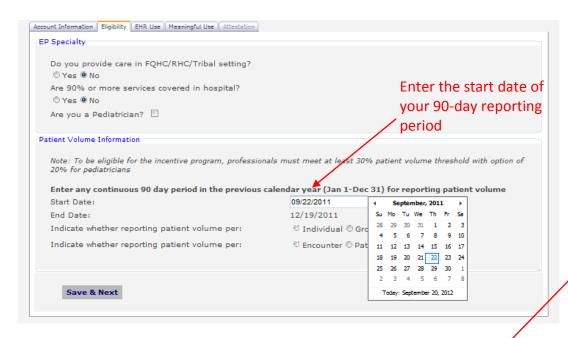


## If No, then click box if you are a pediatrician and continue to Patient Volume Information

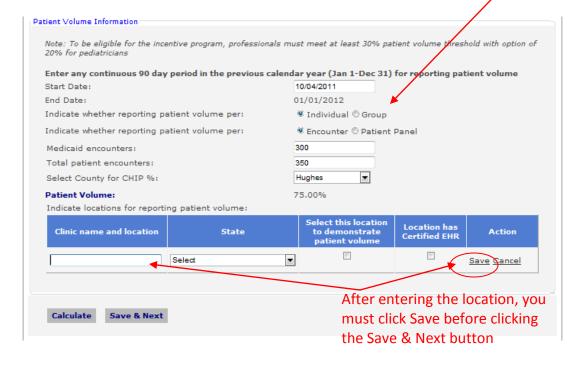


If you are not hospital based, proceed to the pediatrician indication and then on to the patient volume information.

## 4. Patient Volume - Eligibility Tab

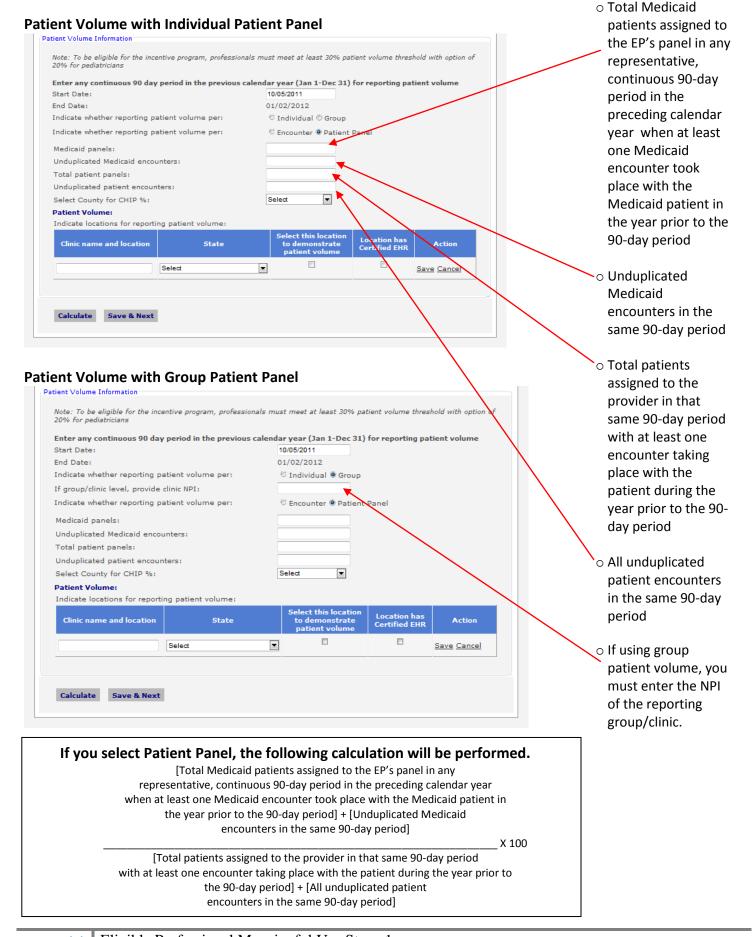


## **Patient Volume for Individuals using Encounters**

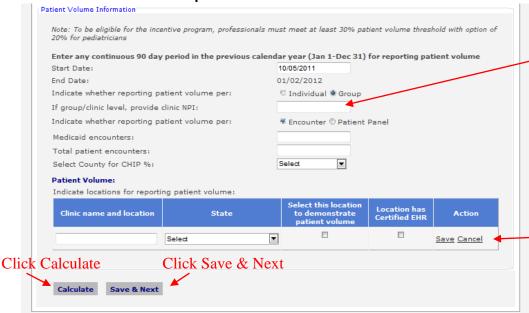


- o Enter a Start Date for your 90-day reporting period. The end date will be calculated.
- The Start Date must fall within the preceding calendar year prior to reporting.
- Click whether you will be reporting patient volume as an individual or a group.
- o Click whether your will be using encounters or a patient panel.
- Enter in the numbers from your 90-day reporting period and the county where you see the majority of your Medicaid patients.
- o Enter the location(s) that you will be using to calculate your patient volume. After entered, click save.
- o Click Calculate to determine your patient volume adjusted for CHIP recipients.
- Click Save & Next

Go to the EHR Use Tab



#### **Patient Volume with Group Encounter**



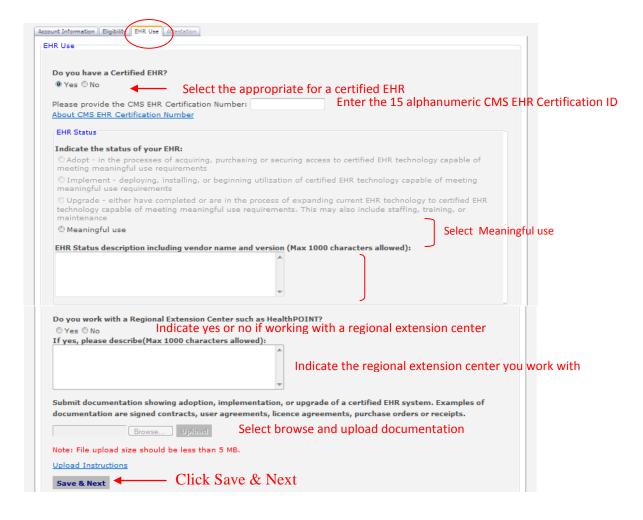
## Clinic/Group Volume

Providers have the option to use the practice or clinic Medicaid patient volume/individuals with needs patient volume under three conditions as outlined in the final rule.

- 1. Clinic or group practice patient volume is appropriate as a patient volume methodology calculation for the EP (for example: If the EP sees only Medicare, commercial or self pay patients, then this is not an appropriate calculation)
- 2. There is an auditable data source to support the clinics patient volume determination
- 3. As long as the practice and EPs decide to use one methodology in each year

- If using group patient volume, you must enter the NPI of the reporting group/clinic
- o Enter the location(s) that you will be using to calculate your patient volume. After entered, update option will appear click Save
- You must select at least one practice location that you will be reporting Medicaid **Patient** volumes and utilizing EHR.
- o Click Calculate to determine your patient volume adjusted for **CHIP**

#### 5. EHR Use



## 6. REQUIREMENTS FOR MEANINGFUL USE MEASURES FOR EPS

15 out of 15 Core Meaningful Use measures must be met according to the CMS threshold.

o Exception – If CMS allows exclusion to a measure and the EP attests to that exclusion, then that measure is still considered completed.

5 out of 10 Menu Measures must be met according to the CMS threshold (including exclusions) and At least 1 of the 5 Menu Measures met by the EP must be from the Public Health List.

o Exception - If an EP meets the criteria for and can claim exclusion for both of the public health menu measures, the EP must still select one public health menu measure and attest that the EP qualifies for the exclusion.

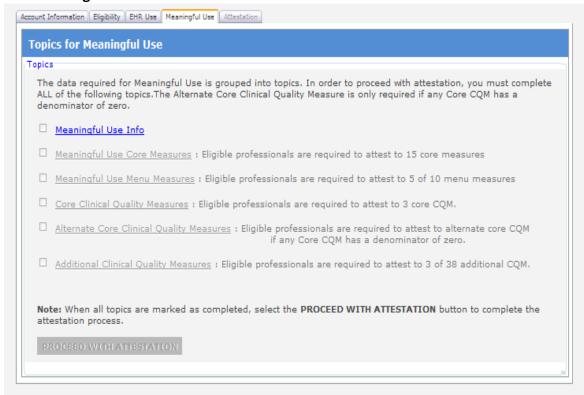
EPs are encouraged to select the remaining 4 that relate to his/her practice.

EP must attest to 6 and up to 9 Clinical Quality Measures.

- 3 Core Clinical Quality Measures and/or up to 3 Alternative CQMs (Alternative Measures required for any Core measures with a denominator of zero), and 3 Additional CQMs
  - No patients in the measure population; It is acceptable to report zero in the denominator, even for 1 or more measures, as long as that is the value displayed & calculated by the certified EHR. The EP attests to this fact.
  - The automated reporting of the clinical quality measures will be accomplished using certified EHR technology interoperable with the system designated by the State to receive the data.

For additional information on Meaningful Use Measures Please see the following CMS Web site below: https://www.cms.gov/EHRIncentivePrograms/30 Meaningful Use.asp#TopOfPage

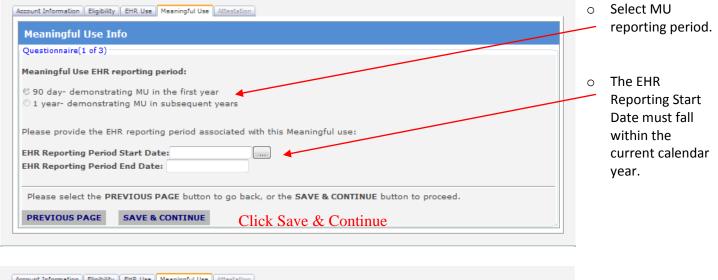
## 6.1 Meaningful Use Measure Menu Screen

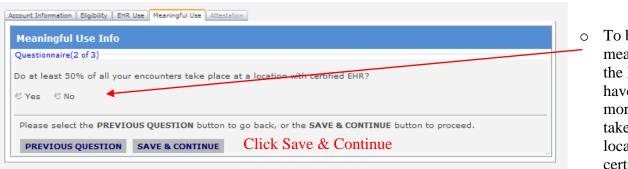


#### **Navigation:**

- Meaningful Use Info EHR reporting period is entered.
- Meaningful Use Core Measures Takes the EP to the first screen of the Meaningful Use Core Measures, active after MU info is complete.
- Meaningful Use Menu Measures Takes the EP to the first screen of the Meaningful Use Menu Measures, only active after the MU Core Measures are complete.
- Core Clinical Quality Measures Takes the EP to the first screen of the Core Clinical Measures, only active after the MU Menu Measures are complete.
- Alternate Core Clinical Quality Measure Takes the EP to the first screen of the Alternative Core Clinical Quality Measures, only active after the Core Clinical Quality Measures are completed and at least one of the entries for the denominator is zero.
- Additional Clinical Quality Measures Takes the EP to the first screen of the Additional Clinic Quality Measures, only active after the Core Clinical Quality Measures are Completed and no entries for the denominators are zero or after the Alternative Core Clinical Quality Measures are completed if at least one of the entries for the Core CQM For the denominator was zero.

## 6.2 Meaningful Use Info





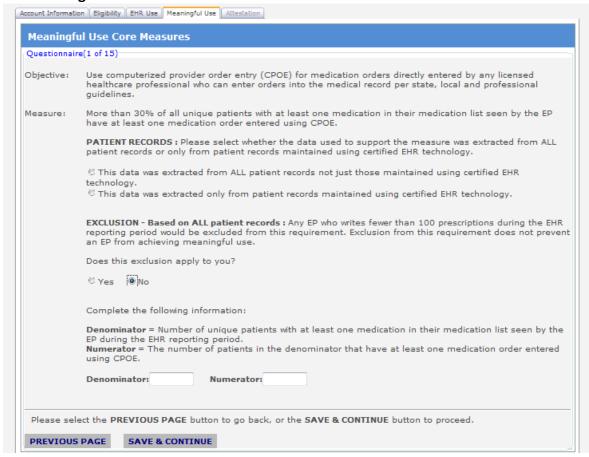
To be a meaningful user, the EP must have 50% or more encounters take place at a location with certified EHR.

## 7.0 Topics for Meaningful Use



Returned to Topics to complete the MU Core Measures

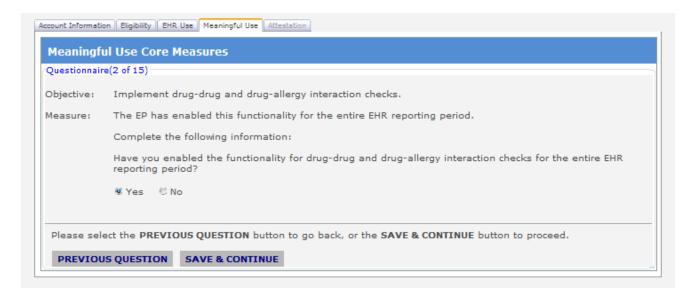
#### 7.1 Meaningful Use Core Measure 1 screen



All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP should be allowed to Save & Continue to the next measure. The following details other requirements of this screen.

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the >30% threshold, N/D > 30% 0
- If an EP responds Yes to the exclusion then they have met the measure threshold. 0

## 7.2 Meaningful Use Core Measure 2 Screen

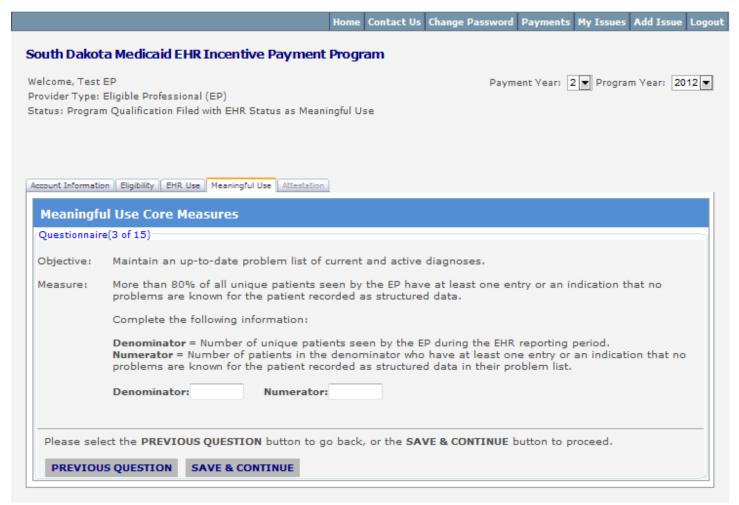


Select Yes or No to continue to the next screen.

## 7.3 Meaningful Use Core Measure 3 Screen







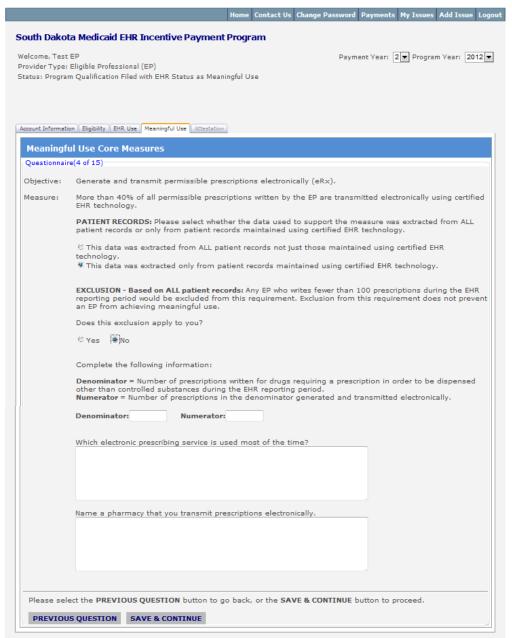
All fields must be completed before the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the >80% threshold, N/D > 80%

## 7.4 Meaningful Use Core Measure 4 Screen







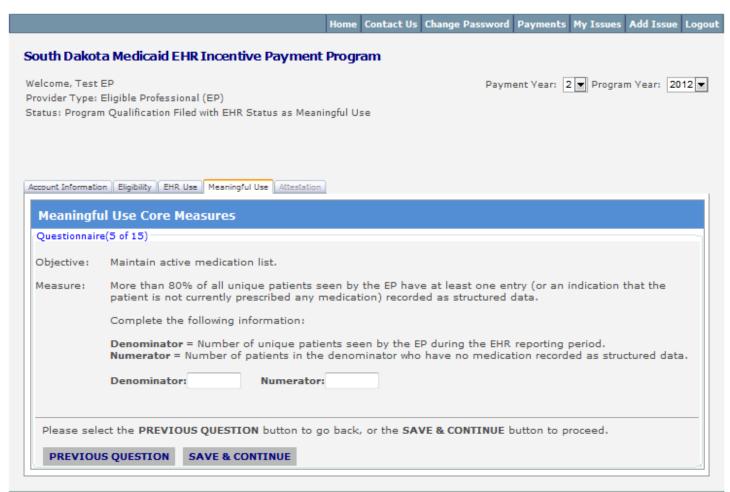
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP should be allowed to Save & Continue to the next measure. The following details other requirements of this screen.

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator  $\cap$
- If not excluded, the EP must meet the >40% threshold, N/D > 40% 0
- If an EP responds Yes to the exclusion then they have met the measure threshold. 0

## 7.5 Meaningful Use Core Measure 5 Screen







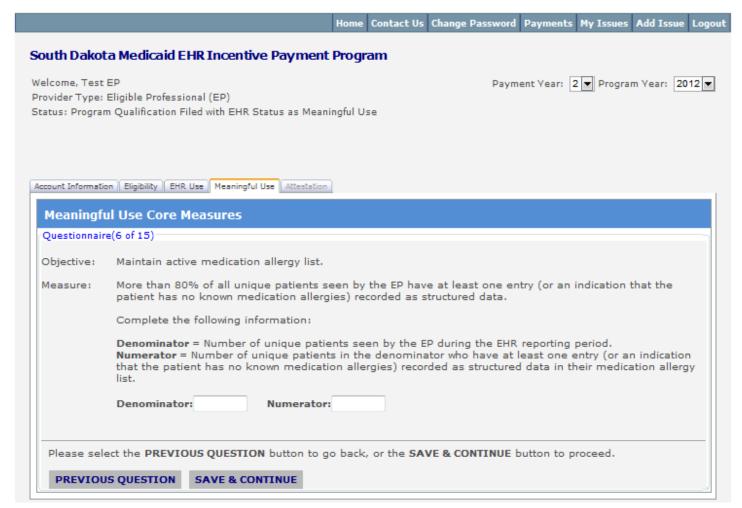
All fields must be completed before the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number
- The Numerator should be less than or equal to the Denominator
- o If not excluded, the EP must meet the >80% threshold, N/D > 80%

## 7.6 Meaningful Use Core Measure 6 Screen







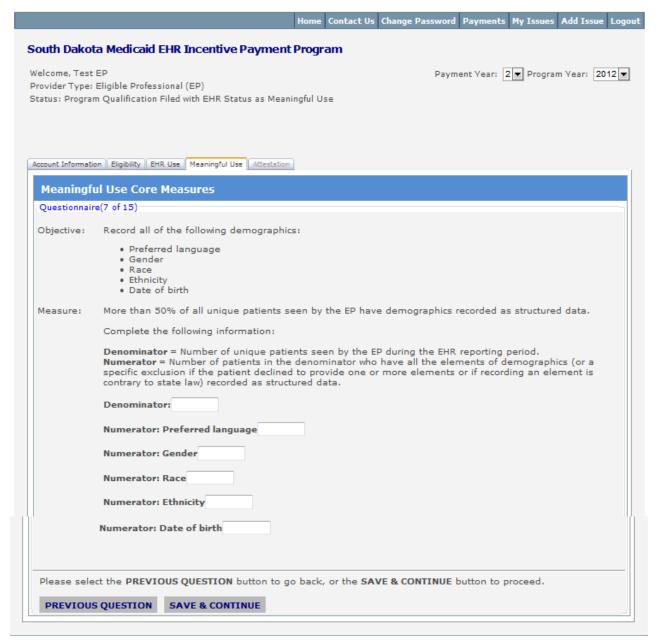
All fields must be completed before the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- 0 The Numerator should be less than or equal to the Denominator
- If not excluded, the EP must meet the >80% threshold, N/D > 80% 0

## 7.7 Meaningful Use Core Measure 7 Screen







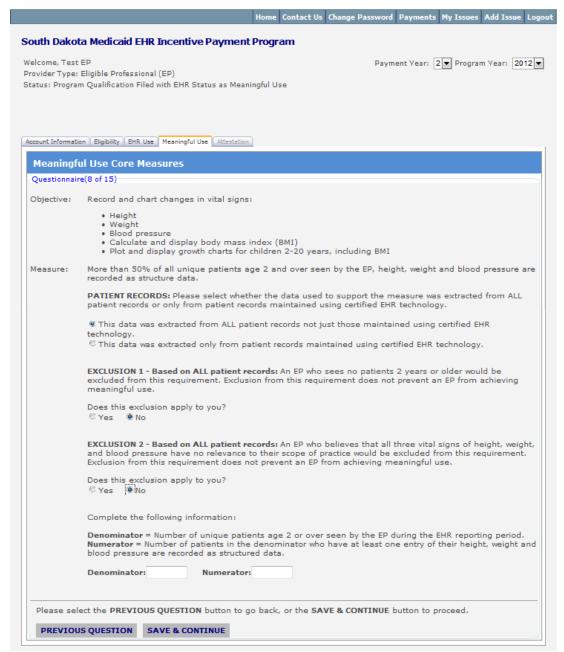
All fields must be completed before the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- 0 The Numerator and Denominator must be a whole number
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the >50% threshold, N/D >50%0

## 7.8 Meaningful Use Core Measure 8 Screen







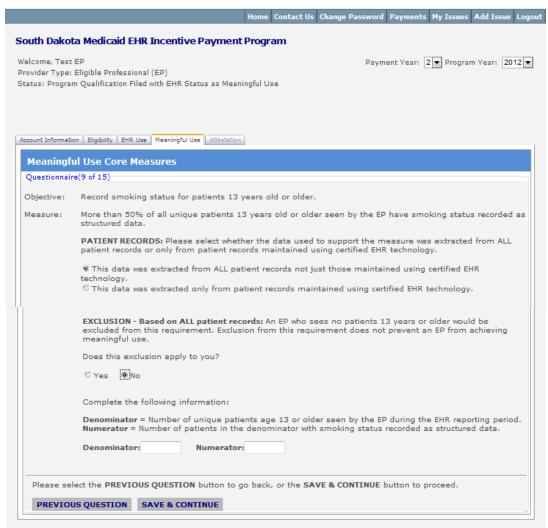
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the >50% threshold, N/D > 50% 0
- If an EP responds Yes to exclusion 1 or 2 then they have met the measure threshold

## 7.9 Meaningful Use Core Measure 9 Screen







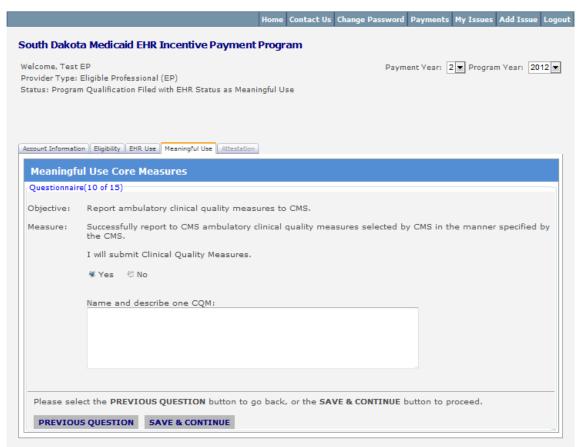
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the >50% threshold, N/D > 50% 0
- If an EP responds Yes to exclusion then they have met the measure threshold  $\bigcirc$

## 7.10 Meaningful Use Core Measure 10 Screen







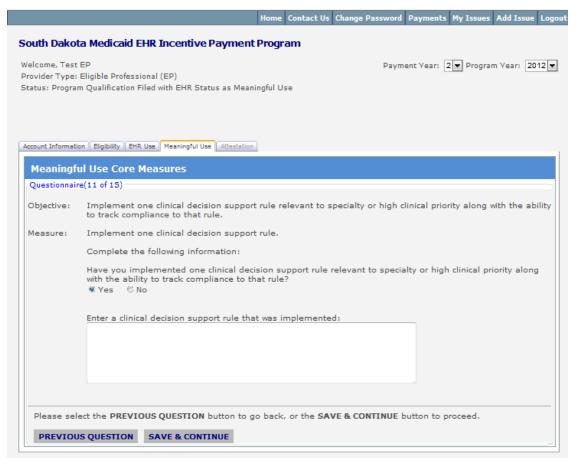
All fields must be completed before the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- Please select Yes or No 0
- If Yes, enter Name and describe one CQM 0

## 7.11 Meaningful Use Core Measure 11 Screen







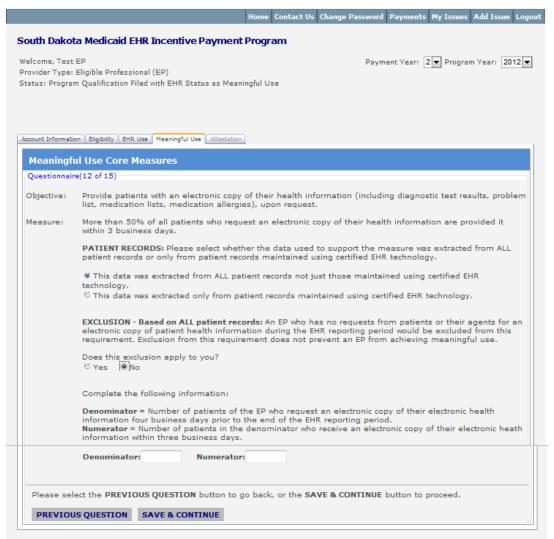
All fields must be completed before the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- Please select Yes or No 0
- The EP must enter an answer on the last question on the page. 0

## 7.12 Meaningful Use Core Measure 12 Screen







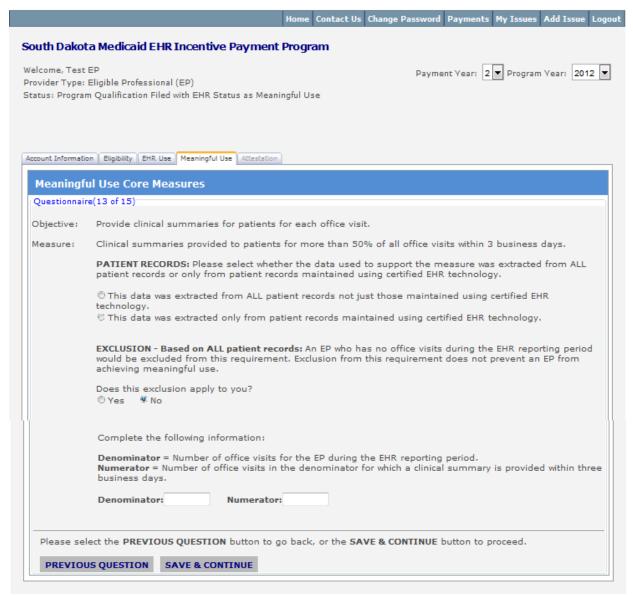
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator
- If not excluded, the EP must meet the >50% threshold, N/D > 50%  $\bigcirc$
- If an EP responds Yes to exclusion then they have met the measure threshold

## 7.13 Meaningful Use Core Measure 13 Screen







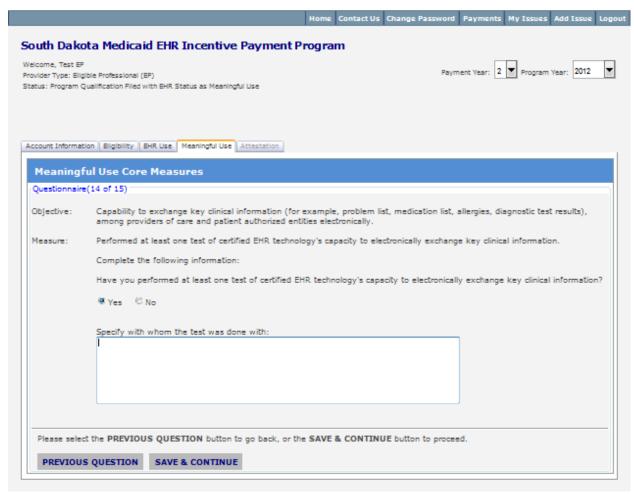
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP is allowed to save and continue to the next measure. The following details are other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator
- If not excluded, the EP must meet the >50% threshold, N/D > 50% 0
- If an EP responds Yes to exclusion then they have met the measure threshold

## 7.14 Meaningful Use Core Measure 14 Screen







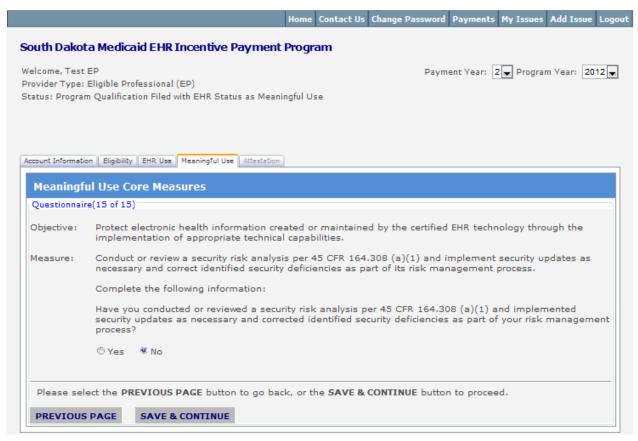
All fields must be completed before the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- A response must be submitted 0
- The EP must enter an answer to the question 0

## 7.15 Meaningful Use Core Measure 15 Screen







All fields must be completed before the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- 0 A response must be submitted
- The EP must enter an answer to the question 0

# 7.16 Summary of Core Measures





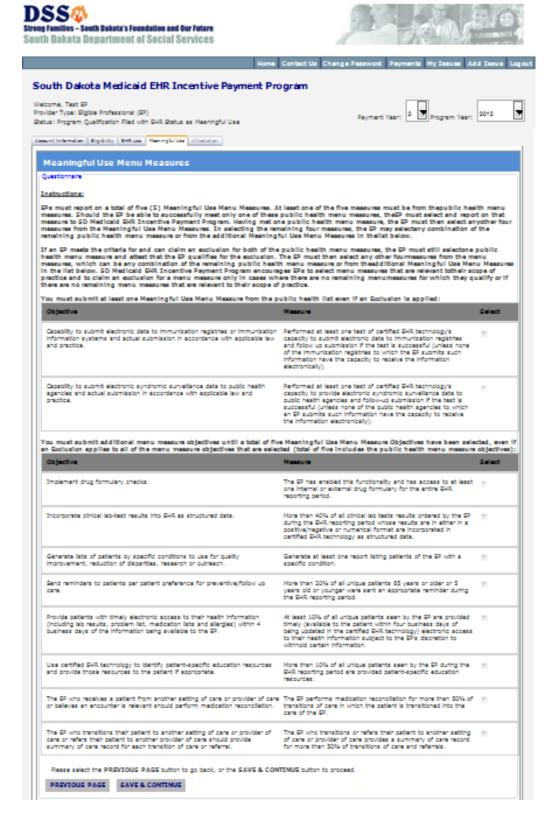
rth Dakota Medicaid EHR Incentive Paym	ent Program			
ome, Test EP	-			
der Type: Eligible Professional (EP)	Pay	yment Year: 2 Program	Year: 2012	
s: Program Qualification Filed with EHR Status as Meaningful Use				
unt Information   Bligibility   BHR Use   Meaningful Use   Attestati	on			
Summary of Measures				
eaningful Use Core Measures				
Objective	Measure	Entered	Select	
Ise computerized provider order entry (CPOE) for	More than 30% of all unique patients with at	Denominator = 100	Edit	
nedication orders directly entered by any licensed	least one medication in their medication list			
realthcare professional who can enter orders into the nedical record per state, local and professional	seen by the EP have at least one medication			
nedical record per state, local and professional juidelines.	order entered using CPOE.			
mplement drug-drug and drug-allergy interaction checks.	The EP has enabled this functionality for the	Yes	Edit	
	entire EHR reporting period.			
faintain an up-to-date problem list of current and active	More than 80% of all unique patients seen	Denominator = 1	Edit	
liagnoses.	by the EP have at least one entry or an	Numerator = 1		
	indication that no problems are known for the patient recorded as structured data.			
Senerate and transmit permissible prescriptions	More than 40% of all permissible	Denominator = 1	Edit	
electronically (eRx).	prescriptions written by the EP are	Numerator = 1	Luit	
, (,	transmitted electronically using certified EHR			
	technology.			
Maintain active medication list.	More than 80% of all unique patients seen	Denominator = 1	Edit	
	by the EP have at least one entry (or an	Numerator = 1		
	indication that the patient is not currently prescribed any medication) recorded as			
	structured data.			
Maintain active medication allergy list.	More than 80% of all unique patients seen	Denominator = 1	Edit	
	by the EP have at least one entry (or an	Numerator = 1		
	indication that the patient has no known			
	medication allergies) recorded as structured			
	data.			
Record all of the following demographics:	More than 50% of all unique patients seen by the EP have demographics recorded as	Denominator = 100 Numerator 1= 20	Edit	
Preferred language	structured data.	Numerator 1= 20 Numerator 2= 5		
Gender		Numerator 3= 10		
Race     Sthelich.		Numerator 4= 10		
Ethnicity     Date of birth		Numerator 5= 10		
- Date of Direct				
Record and chart changes in vital signs:	More than 50% of all unique patients age 2	Denominator = 20	Edit	
- U-1-64	and over seen by the EP, height, weight and			
Height     Weight	blood pressure are recorded as structure			
Blood pressure	data.			
Calculate and display body mass index (BMI)				
<ul> <li>Plot and display growth charts for children 2-20</li> </ul>				
years, including BMI				
Record smoking status for patients 13 years old or older	More than 50% of all unique patients 13	Denominator = 10	Edit	
		Numerator = 9		

## **Summary of Core Measures - Continued**

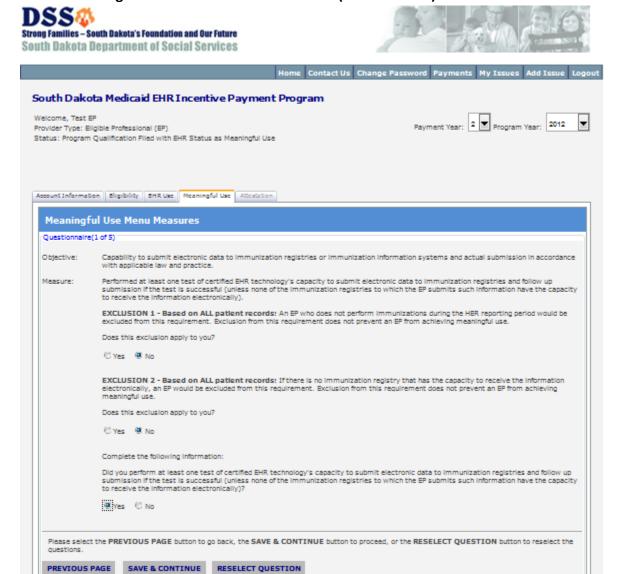
Maintain active medication allergy list.	More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data.	Denominator = 1 Numerator = 1	Edit
Record all of the following demographics:  • Preferred language  • Gender  • Race  • Ethnicity  • Date of birth	More than 50% of all unique patients seen by the EP have demographics recorded as structured data.	Denominator = 100 Numerator 1= 20 Numerator 2= 5 Numerator 3= 10 Numerator 4= 10 Numerator 5= 10	Edit
Record and chart changes in vital signs:  Height Weight Blood pressure Calculate and display body mass index (BMI) Plot and display growth charts for children 2-20 years, including BMI	More than 50% of all unique patients age 2 and over seen by the EP, height, weight and blood pressure are recorded as structure data.		Edit
Record smoking status for patients 13 years old or older.	More than 50% of all unique patients 13 years old or older seen by the EP have smoking status recorded as structured data.	Denominator = 10 Numerator = 9	Edit
Report ambulatory clinical quality measures to CMS.	Successfully report to CMS ambulatory clinical quality measures selected by CMS in the manner specified by the CMS.	Yes	Edit
Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance to that rule.	Implement one clinical decision support rule.	Yes	Edit
Provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, medication allergies), upon request.	More than 50% of all patients who request an electronic copy of their health information are provided it within 3 business days.	Denominator = 10 Numerator = 15	Edit
Provide clinical summaries for patients for each office visit.	Clinical summaries provided to patients for more than 50% of all office visits within 3 business days.	Denominator = 20 Numerator = 20	Edit
Capability to exchange key clinical information (for example, problem list, medication list, allergies, diagnostic test results), among providers of care and patient authorized entities electronically.	Performed at least one test of certified EHR technology's capacity to electronically exchange key clinical information.	Yes	Edit
Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.	Conduct or review a security risk analysis per 45 CFR 164.308 (a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process.	No	Edit
To Edit information, select the EDIT link next to the meas riewing the summary and move to Meaningful Use Topics.		MU TOPICS button to	skip
viewing the summary and move to Meaningful Use Topics.  MOVE TO MU TOPICS		NO TOPICS DUMNIE	skip

The EP can review the core measures. To Edit the information, select the EDIT link next to the measure to edit. Select the MOVE TO MU TOPICS button to skip viewing the summary and move to Meaningful Use Topics.

## 7.17 Meaningful Use Menu Measures Selection Screen



## 7.17.1 Meaningful Use Menu Measure 1 Screen (Public Health)



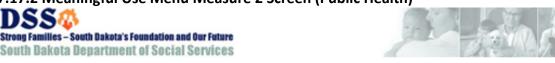
All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

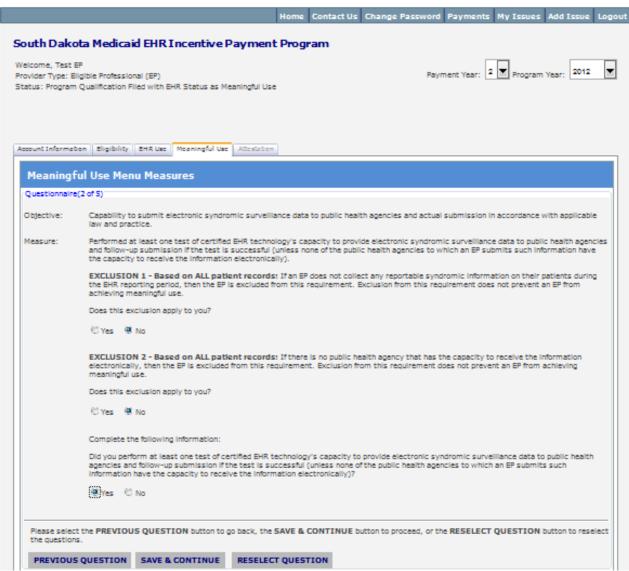
- Exclusion response required  $\circ$
- Response of yes or no required if exclusion 1 and 2 has not been marked as yes 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

If selecting "Reselect Question", EP will be taken back to Meaningful Use Menu Measure Selection Screen.

## 7.17.2 Meaningful Use Menu Measure 2 Screen (Public Health)





All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- Exclusion response required 0
- Response of yes or no required if exclusion 1 and 2 has not been marked as yes 0

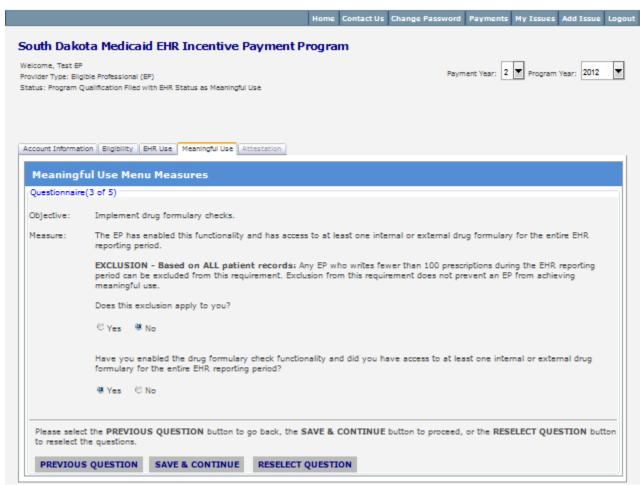
Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

If selecting "Reselect Question", EP will be taken back to Meaningful Use Menu Measure Selection Screen.

# 7.17.3 Meaningful Use Menu Measure 3 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

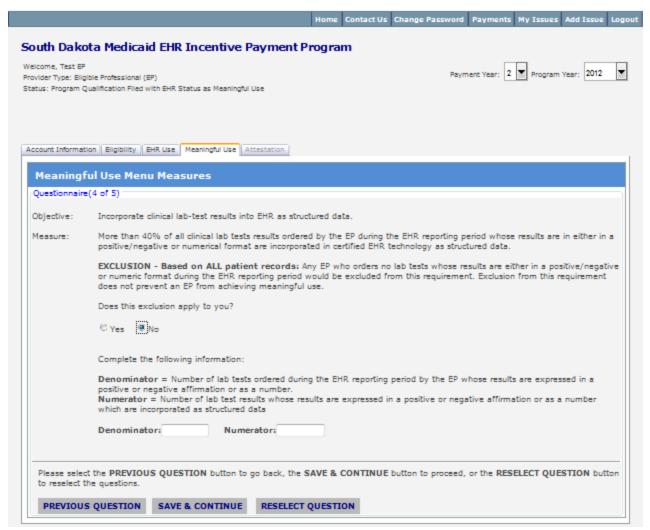
- Exclusion response required 0
- Response of yes or no required if exclusion 1 and 2 has not been marked as yes 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.4 Meaningful Use Menu Measure 4 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

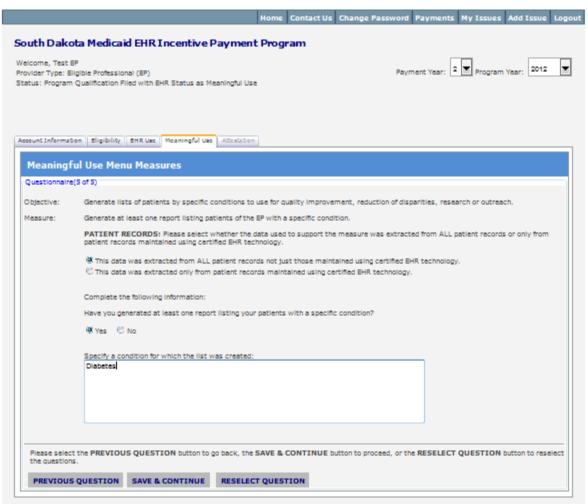
- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator  $\cap$
- If not excluded, the EP must meet the > 40% threshold, N/D > 40% 0
- Response of Yes to the exclusion then they have met the measure threshold  $\circ$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.5 Meaningful Use Menu Measure 5 Screen







All fields must be completed before EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

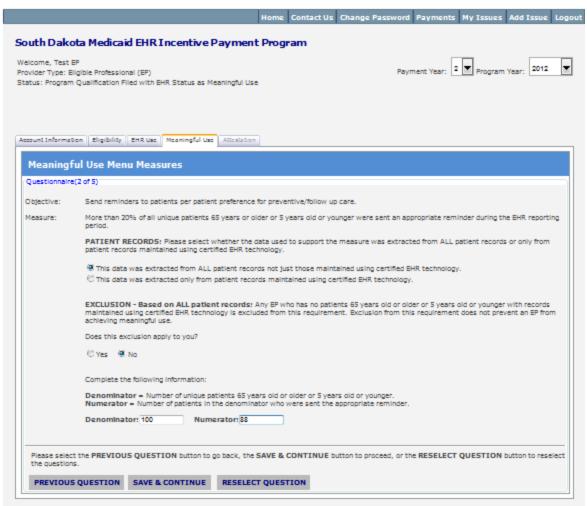
- Patient Record response required 0
- Response of yes or no required 0
- The EP must enter an answer on the last question on the page

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.6 Meaningful Use Menu Measure 6 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

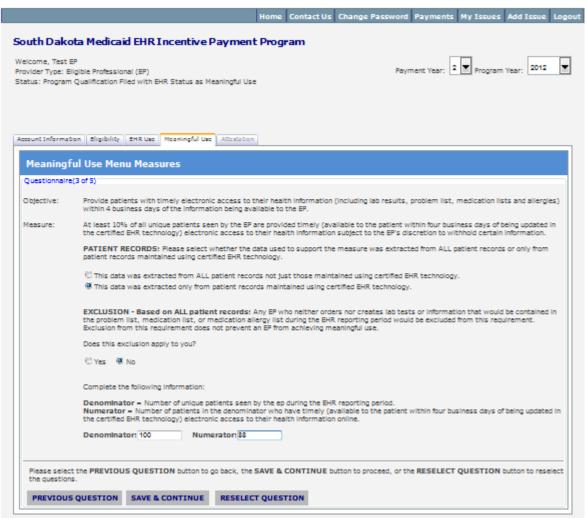
- The Numerator and Denominator must be a whole number
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the > 20% threshold, N/D > 20% 0
- Response of Yes to the exclusion then they have met the measure threshold 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.7 Meaningful Use Menu Measure 7 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

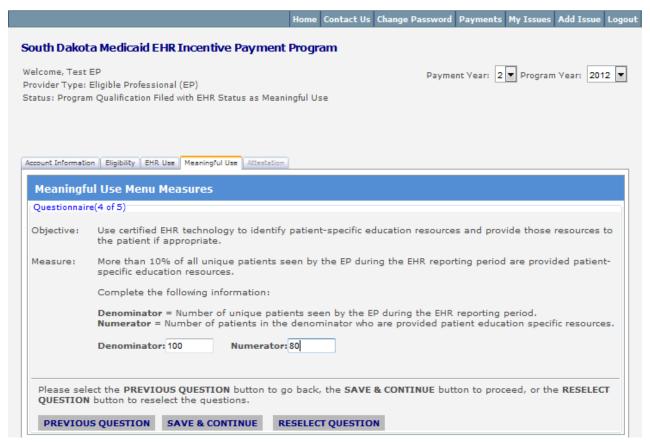
- o The Numerator and Denominator must be a whole number
- The Numerator should be less than or equal to the Denominator
- If not excluded, the EP must meet the > 10% threshold, N/D > 10%
- Response of Yes to the exclusion then they have met the measure threshold

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.8 Meaningful Use Menu Measure 8 Screen







All fields must be completed before EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

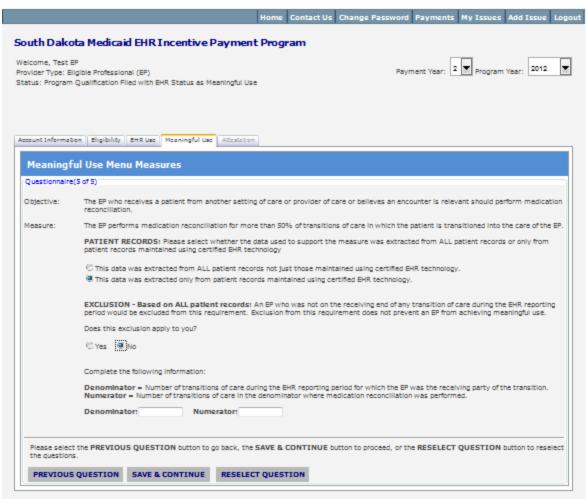
- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator 0
- If not excluded, the EP must meet the > 10% threshold, N/D > 10% 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.9 Meaningful Use Menu Measure 9 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

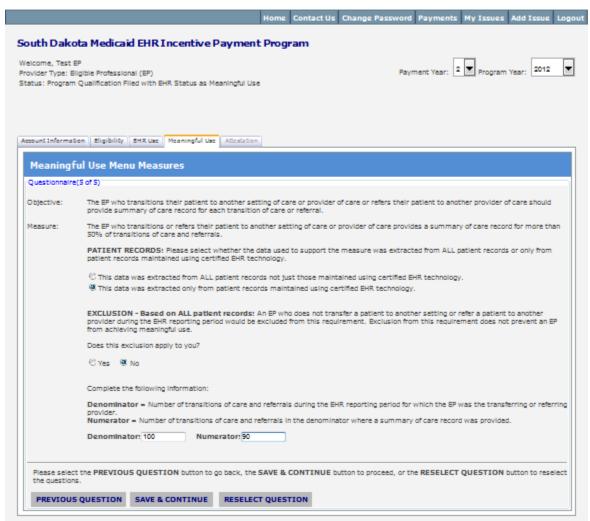
- The Numerator and Denominator must be a whole number  $\circ$
- The Numerator should be less than or equal to the Denominator
- If not excluded, the EP must meet the > 50% threshold, N/D > 50%  $\circ$
- Response of Yes to the exclusion then they have met the measure threshold

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.17.10 Meaningful Use Menu Measure 10 Screen







All fields must be completed unless the exclusion was responded to with 'Yes', in that case no other field is required and the EP will be allowed to save and continue to the next measure. The following details other requirements of this screen:

- The Numerator and Denominator must be a whole number 0
- The Numerator should be less than or equal to the Denominator  $\circ$
- If not excluded, the EP must meet the > 50% threshold, N/D > 50% 0
- Response of Yes to the exclusion then they have met the measure threshold 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

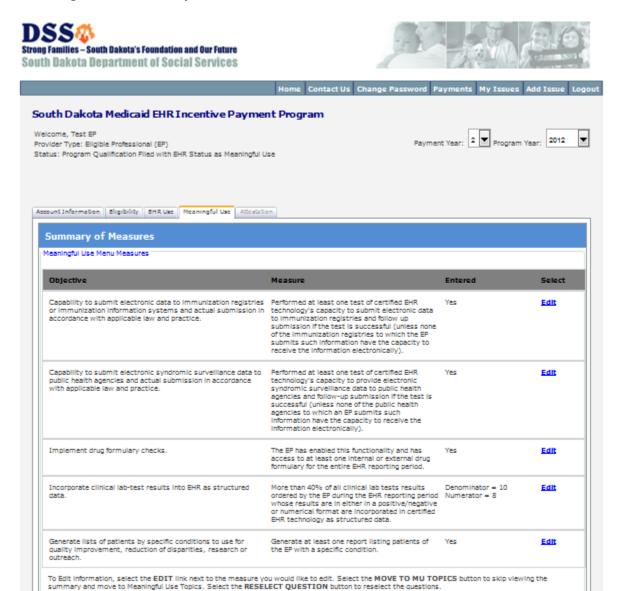
# 7.17.11 Meaningful Use Summary of Measures





th Daketa Medicaid EUD Itive Dever-	at Decoupes		
th Dakota Medicaid EHR Incentive Paymer	nt Program		
ome, Test EP der Type: Bligible Professional (EP) is: Program Qualification Filed with EHR Status as Meaningful U	Paymer ise	it Year: 2 Program	Year: 2012
ant Information   Eligibility   EHR Use   Meaningful Use   Attestate	in.		
ummary of Measures			
saningful Use Menu Measures			
Objective	Measure	Entered	Select
Capability to submit electronic data to immunization registries or immunization information systems and actual submission in accordance with applicable law and practice.		Yes	Edit
Capability to submit electronic syndromic surveillance data to sublic health agencies and actual submission in accordance with applicable law and practice.	Performed at least one test of certified EHR technology's capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission if the test is successful (unless none of the public health agencies to which an EP submits such information have the capacity to receive the information electronically).	Yes	Edit
mplement drug formulary checks.	The EP has enabled this functionality and has access to at least one internal or external drug formulary for the entire EHR reporting period.	Yes	Edit
ncorporate cilinical lab-test results into EHR as structured lata.	More than 40% of all clinical lab tests results ordered by the EP during the EHR reporting period whose results are in either in a positive/negative or numerical format are incorporated in certified EHR technology as structured data.	Denominator = 10 Numerator = 8	Edit
Senerate lists of patients by specific conditions to use for juality improvement, reduction of disparities, research or outreach.	Generate at least one report listing patients of the EP with a specific condition.	Yes	Edit
capability to submit electronic data to immunization registries in immunization information systems and actual submission in accordance with applicable law and practice.		Yes	Edit
iend reminders to patients per patient preference for reventive/follow up care.	More than 20% of all unique patients 65 years or older or 5 years old or younger were sent an appropriate reminder during the EHR reporting period.	Denominator = 100 Numerator = 88	Edit
sts and allergies) within 4 business days of the information	are provided timely (available to the patient	Denominator = 100 Numerator = 88	Edit
ise certified EHR technology to identify patient-specific ducation resources and provide those resources to the patient appropriate.	More than 10% of all unique patients seen by the EP during the EHR reporting period are provided patient-specific education resources.		Edit
The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should	The EP performs medication reconciliation for more than 50% of transitions of care in which the	Denominator = 100 Numerator = 90	Edit

### Meaningful Use Summary of Measures...continued



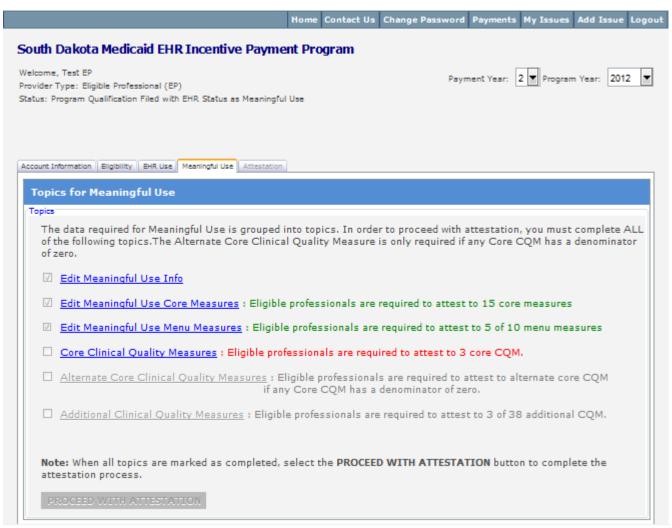
The EP can review the MU measures. To Edit the information, select the EDIT link next to the measure to edit. Select the MOVE TO MU TOPICS button to skip viewing the summary and move to Meaningful Use Topics. Select Core Clinical Quality Measures.

MOVE TO MU TOPICS RESELECT QUESTION

# 7.18 Topics for Meaningful Use





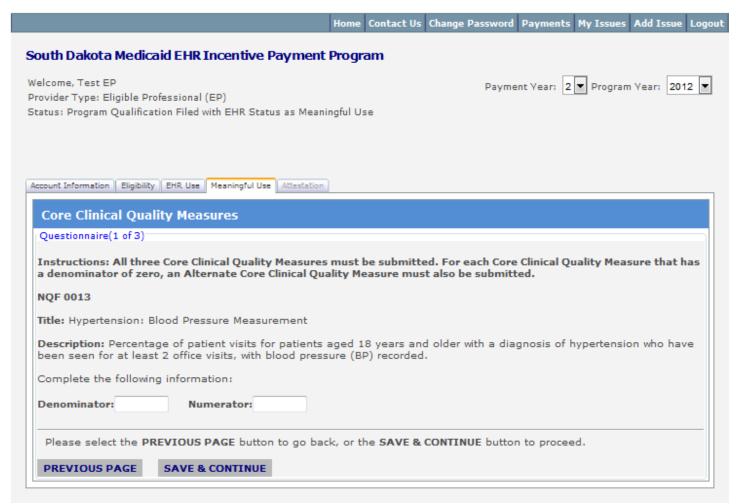


To edit previous topic, select topic and review data. To continue, EP can select Core Clinical Quality Measures.

# 7.19 Core Clinical Quality Measure 1 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the HER reporting period even if the report states zero. The following details are other requirements of this screen:

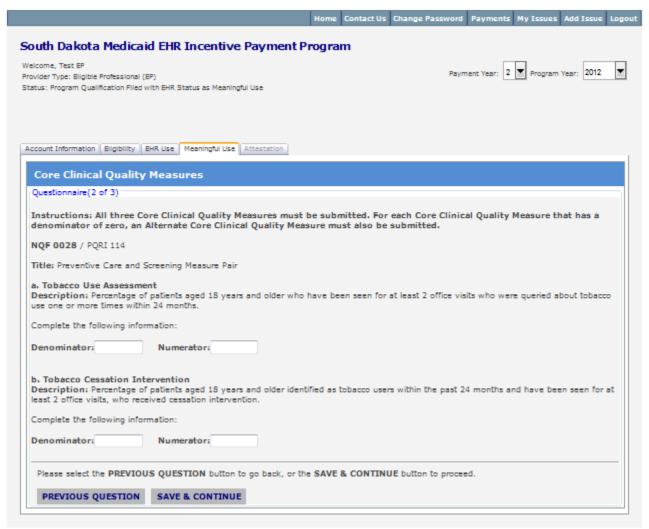
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Numerator must be a whole number. 0
- Please enter a denominator, 0 is acceptable if there is no measure population.
- Denominator must be a whole number. 0
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.20 Core Clinical Quality Measure 2 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the HER reporting period even if the report states zero. The following details are other requirements of this screen:

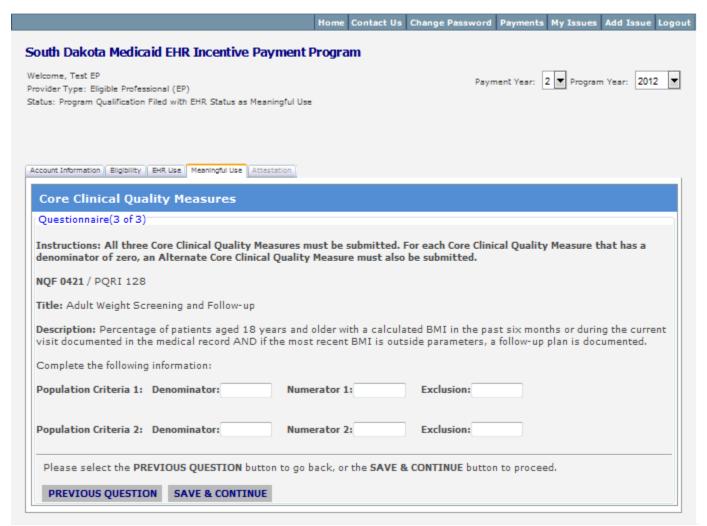
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.  $\circ$
- Numerator must be a whole number. 0
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Denominator must be a whole number. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.21 Core Clinical Quality Measure 3 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

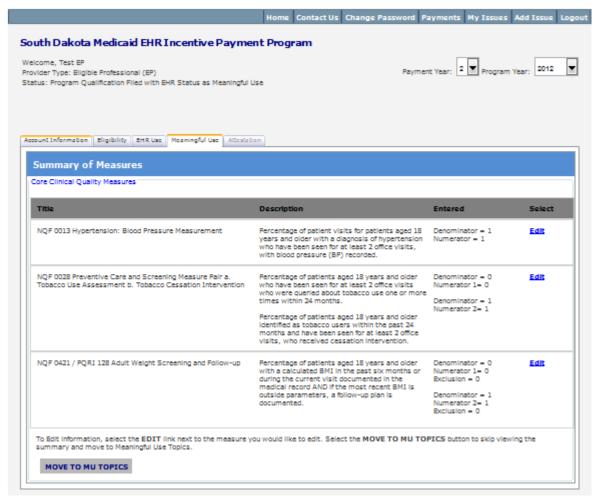
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Numerator must be a whole number.  $\bigcirc$
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Denominator must be a whole number. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0.  $\bigcirc$
- Exclusion must be a whole number. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.22 Summary of Measures

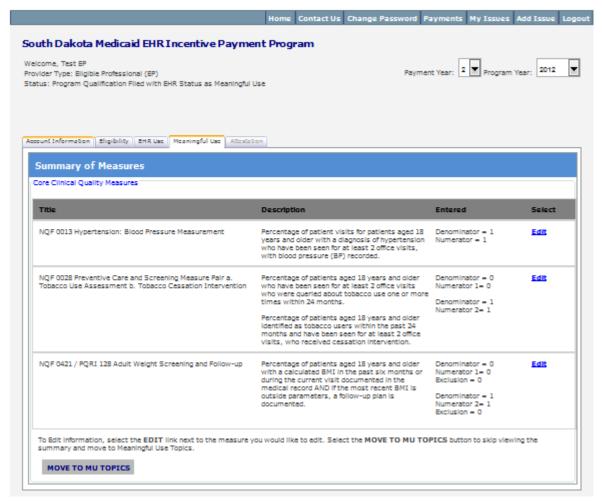










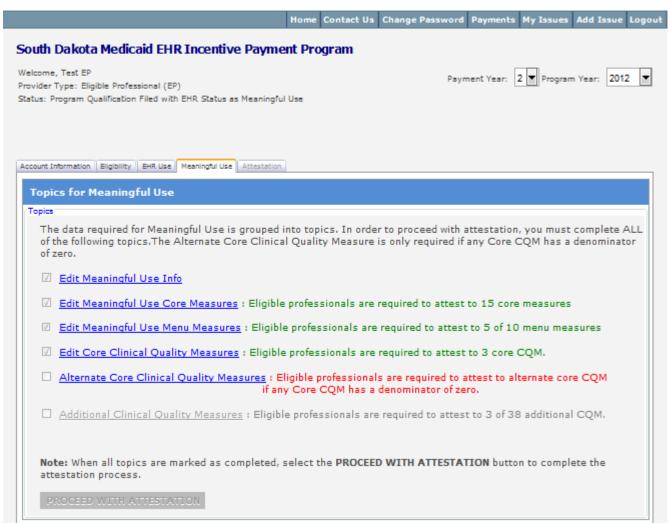


The EP can review the MU measures. To Edit the information, select the EDIT link next to the measure to edit. Select the MOVE TO MU TOPICS button to skip viewing the summary and move to Meaningful Use Topics. Select Alternative Core Clinical Quality Measures.

### 7.23 Topics for Meaningful Use



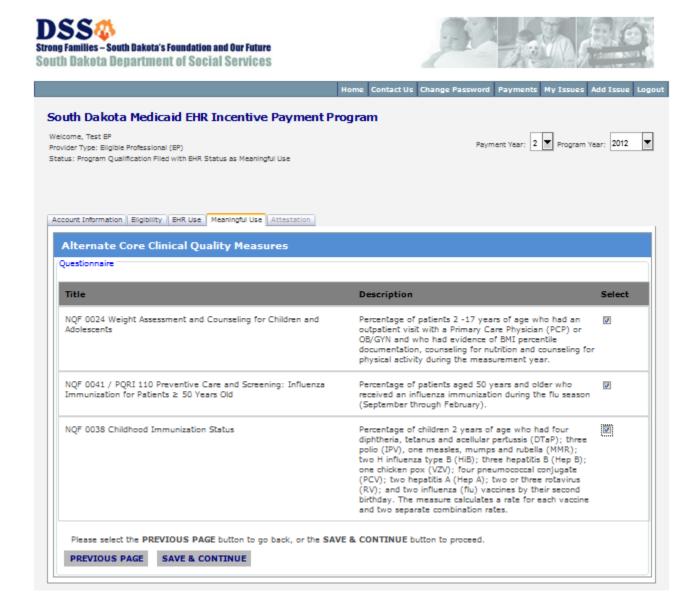




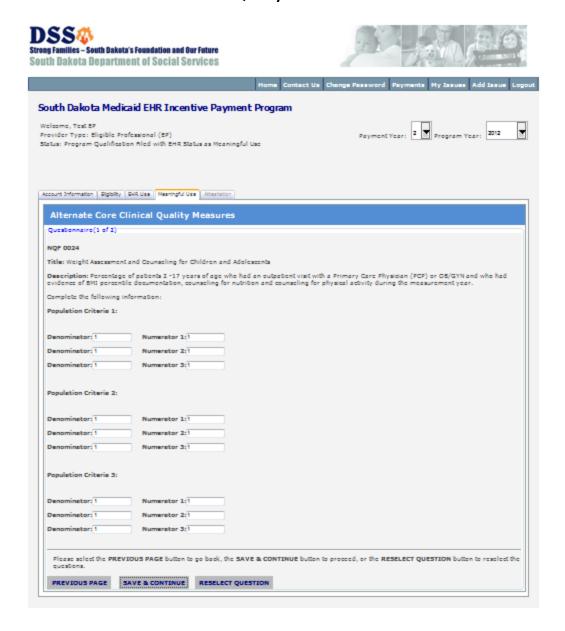
To edit previous topic, select topic and review data. To continue, the EP can select Alternate Core Clinical Quality Measures.

# 7.24 Alternative Core Clinical Quality Measures Selection Screen

If an EP indicates a zero in the denominator for one or more Core Clinical Quality Measures then they must choose an Alternate Clinical Quality Measure to equal the amount of Core Clinical Quality Measures that had a zero in the denominator.



# 7.24.1 Alternative Core Clinical Quality Measure 1 Screen



All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

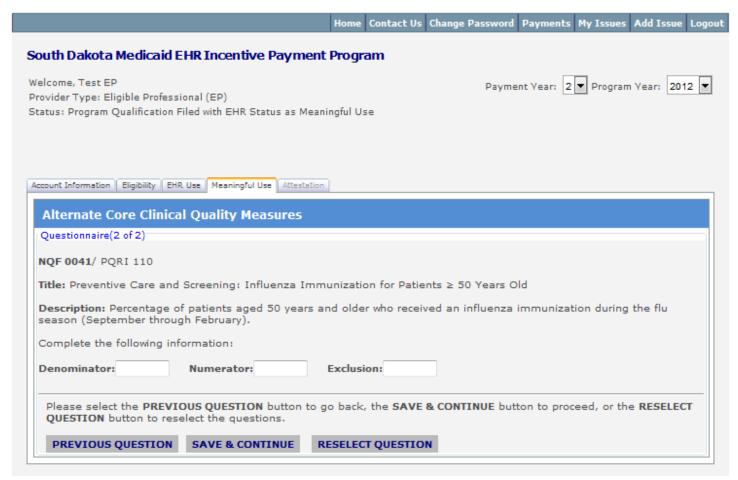
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Numerator must be a whole number. 0
- Please enter a denominator, 0 is acceptable if there is no measure population.  $\circ$
- Denominator must be a whole number. 0
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.24.2 Alternative Core Clinical Quality Measure 2 Screen





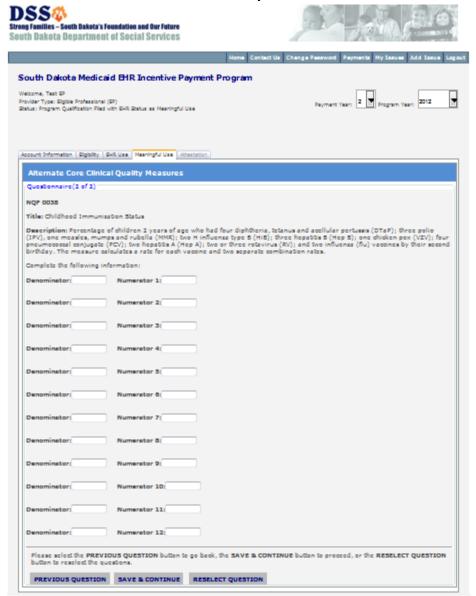


All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology.  $\bigcirc$
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.24.3 Alternative Core Clinical Quality Measure 3 Screen



All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

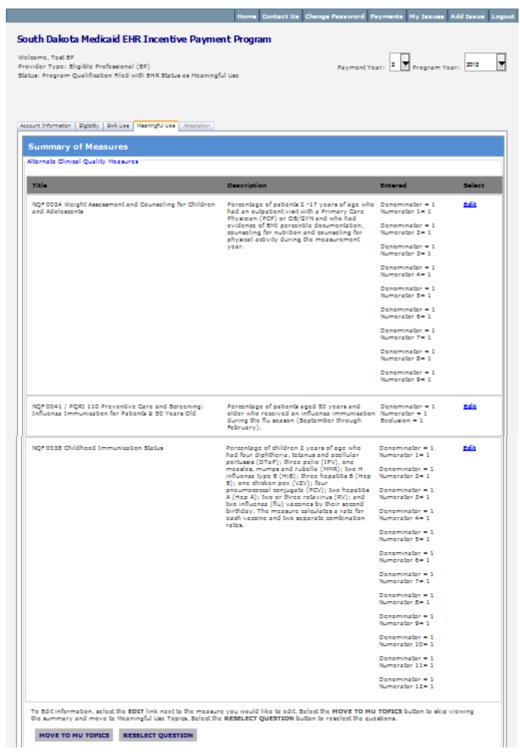
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.24.4 Summary of Measures





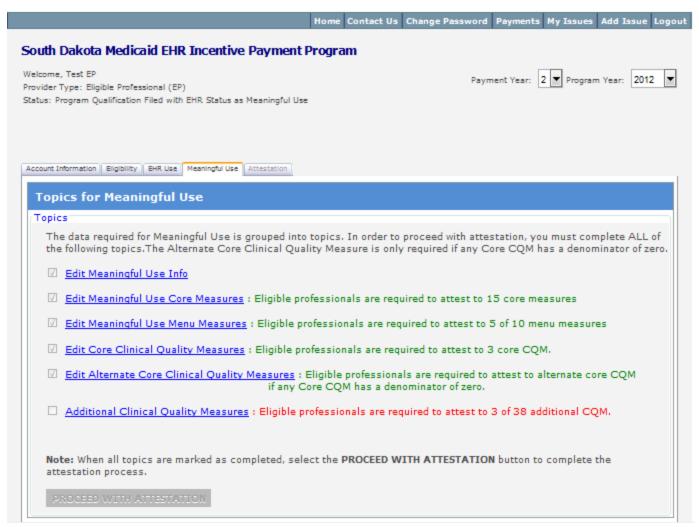


The EP can review the Alternative Quality Measures. To Edit the information, select the EDIT link next to the measure to edit. Select the MOVE TO MU TOPICS button to skip viewing the summary and move to Meaningful Use Topics. Select Alternative Core Clinical Quality Measures.

# 7.25 Topics of Meaningful Use





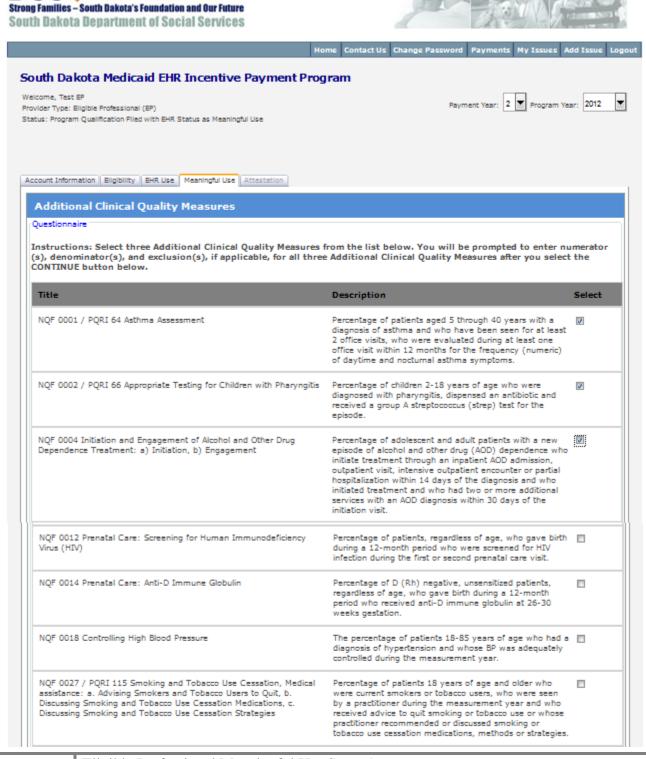


To edit previous topic, select topic and review data. To continue, the EP can select Alternate Core Clinical Quality Measures.

# 7.26 Additional Clinical Quality Measures Selection Screen

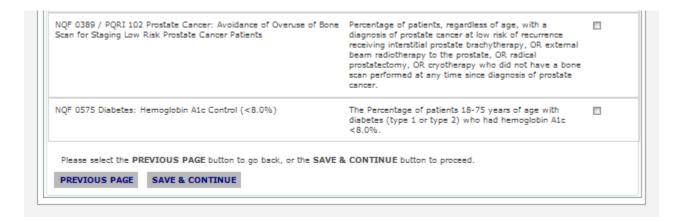
A total of 3 Additional Clinical Quality Measures must be selected by the EP.

If there are not any patients in the measure population, it is acceptable to report zero in the denominator, even for 1 or more measures, as long as that is the value displayed and calculated by the certified EHR.



NQF 0031 / PQRI 112 Breast Cancer Screening	Percentage of women 40-69 years of age who had a mammogram to screen for breast cancer.	
NQF 0032 Cervical Cancer Screening	Percentage of women 21-64 years of age, who received one or more Pap tests to screen for cervical cancer.	
NQF 0033 Chlamydia Screening for Women	Percentage of women 15- 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	В
NQF 0034 / PQRI 113 Colorectal Cancer Screening	Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer.	
NQF 0036 Use of Appropriate Medications for Asthma	Percentage of patients 5 - 50 years of age who were identified as having persistent asthma and were appropriately prescribed medication during the measurement year. Report three age stratifications (5-11 years, 12-50 years, and total).	
NQF0043 / PQRI 111 Pneumonia Vaccination Status for Older Adults	Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	
NQF 0047 / PQRI 53 Asthma Pharmacologic Therapy	Percentage of patients aged 5 through 40 years with a diagnosis of mild, moderate, or severe persistent asthma who were prescribed either the preferred long-term control medication (inhaled corticosteroid) or an acceptable alternative treatment.	
NQF 0052 Low Back Pain: Use of Imaging Studies	Percentage of patients with a primary diagnosis of low back pain who did not have an imaging study (plain x- ray, MRI, CT scan) within 28 days of diagnosis.	В
NQF 0056 / PQRI 163 Diabetes: Foot Exam	The Percentage of patients aged 18 - 75 years with diabetes (type 1 or type 2) who had a foot exam (visual inspection, sensory exam with monofilament, or pulse exam).	
NQF 0059 / PQRI 1 Diabetes: Hemoglobin A1c Poor Control	Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had hemoglobin A1c > 9.0%.	
NQF 0061 / PQRI 3 Diabetes: Blood Pressure Management	Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had blood pressure $<140/90$ mmHg.	В
NQF 0062 / PQRI 119 Diabetes: Urine Screening	Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had a nephropathy screening test or evidence of nephropathy.	
NQF 0064 / PQRI 2 Diabetes: Low Density Lipoprotein (LDL) Management and Control	Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had LDL-C < 100 mg/dL).	
NQF 0067 / PQRI 6 Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed oral antiplatelet therapy.	
NQF 0068 / PQRI 204 Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1-November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and documentation of use of aspirin or another antithrombotic during the measurement year.	
NQF0070 / PQRI 7 Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)	Percentage of patients aged 18 years and older with a diagnosis of CAD and prior MI who were prescribed beta-	

NQF 0073 / PQRI 201 Ischemic Vascular Disease (IVD): Blood Pressure Management	Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1- November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and whose recent blood pressure is in control (<140/90 mmHg).	
NQF 0074 / PQRI 197 Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol	Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed a lipid-lowering therapy (based on current ACC/AHA guidelines).	
NQF 0075 Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control	Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal angioplasty (PTCA) from January 1-November1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had a complete lipid profile performed during the measurement year and whose LDLC< 100 mg/dL.	
NQF 0081 / PQRI 5 Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	Percentage of patients aged 18 years and older with a diagnosis of heart failure and LVSD (LVEF < 40%) who were prescribed ACE inhibitor or ARB therapy.	
NQF 0083 / PQRI 8 Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	Percentage of patients aged 18 years and older with a diagnosis of heart failure who also have LVSD (LVEF $<$ 40%) and who were prescribed beta-blocker therapy.	
NQF 0084 / PQRI 200 Heart Failure (HF): Warfarin Therapy Patients with Atrial Fibrillation	Percentage of all patients aged 18 years and older with a diagnosis of heart failure and paroxysmal or chronic atrial fibrillation who were prescribed warfarin therapy.	
NQF 0086 / PQRI 12 Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	Percentage of patients aged 18 years and older with a diagnosis of POAG who have been seen for at least two office visits who have an optic nerve head evaluation during one or more office visits within 12 months.	
NQF 0088 / PQRI 18 Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months.	В
NQF 0089 / PQRI 19 Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months.	
NQF 0105 Anti-depressant medication management: (a) Effective Acute Phase Treatment, (b) Effective Continuation Phase Treatment	Percentage of patients 18 years of age and older who were diagnosed with a new episode of major depression, treated with antidepressant medication, and who remained on an antidepressant medication treatment.	
NQF 0385 / PQRI 72 Oncology Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	Percentage of patients aged 18 years and older with Stage IIIA through IIIC colon cancer who are referred for adjuvant chemotherapy, prescribed adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12 month reporting period.	
NQF 0387 / PQRI 71 Oncology Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	Percentage of female patients aged 18 years and older with Stage IC through IIIC, ER or PR positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period.	



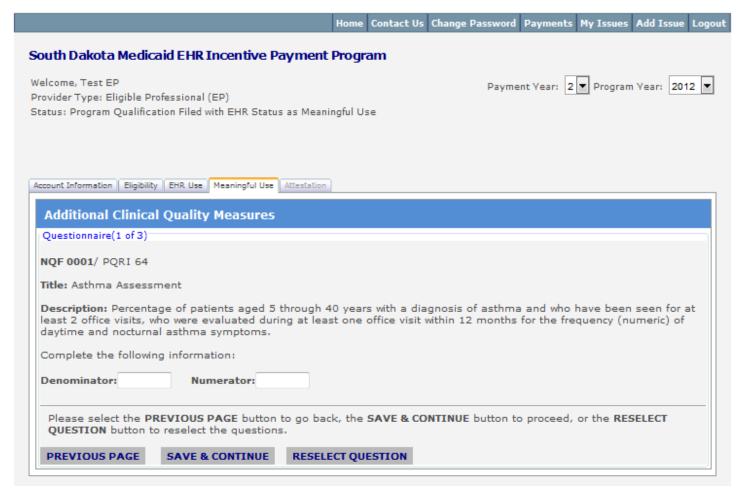
To select a measure add a check in the Select box. Click the Save & Continue button.

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.1 Additional Clinical Quality Measure 1 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

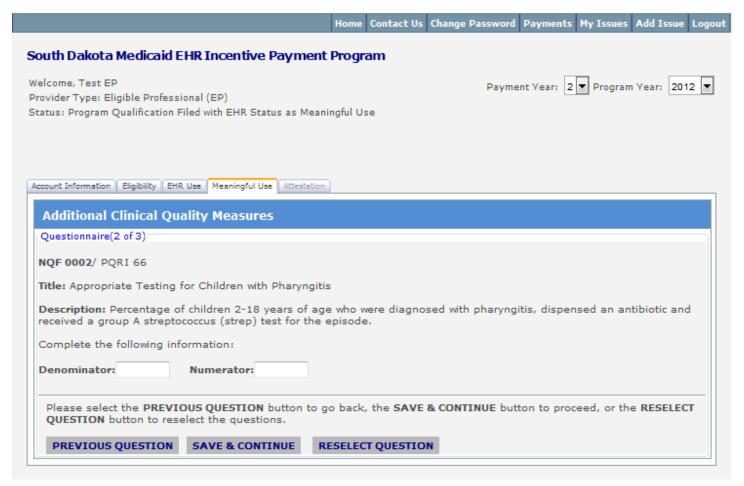
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.2 Additional Clinical Quality Measure 2 Screen





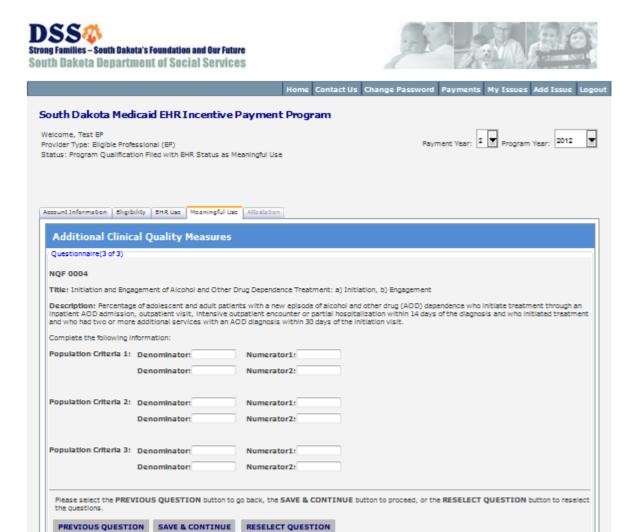


All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology.  $\circ$
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.3 Additional Clinical Quality Measure 3 Screen



All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

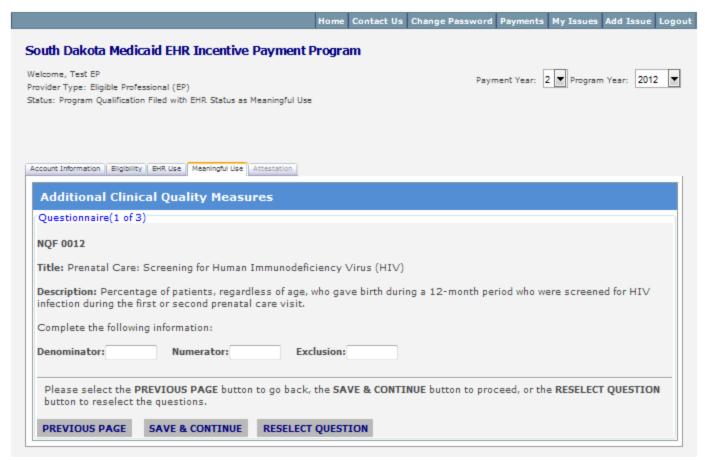
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population.  $\cap$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.4 Additional Clinical Quality Measure 4 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

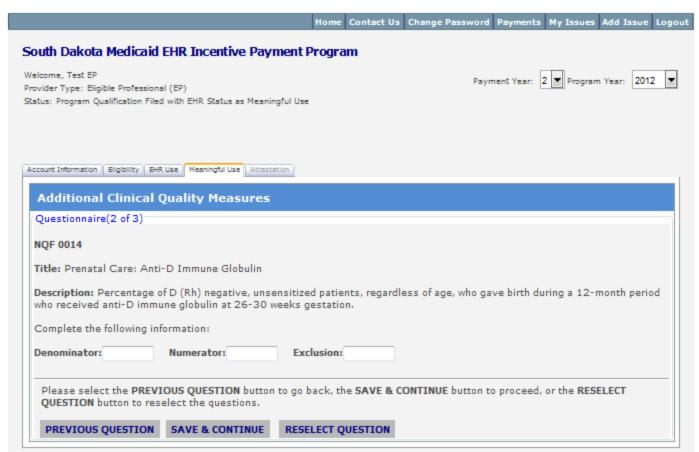
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- The Numerator should be less than or equal to the Denominator.
- Exclusion must be greater than or equal to 0.
- Please provide a whole number less than 1,000,000 for the Exclusion.

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.5 Additional Clinical Quality Measure 5 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

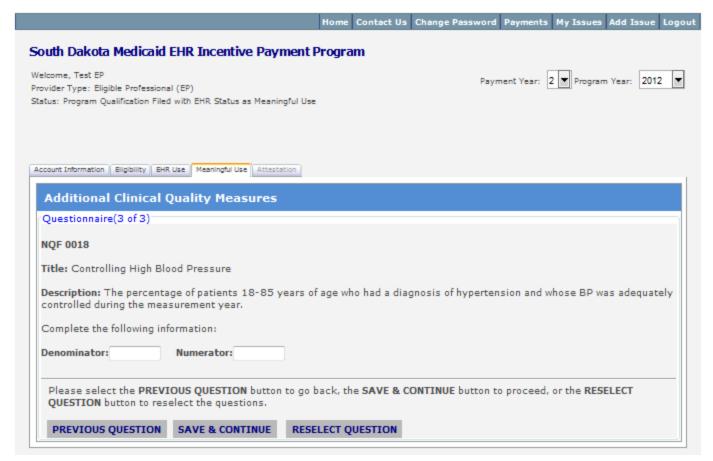
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.6 Additional Clinical Quality Measure 6 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

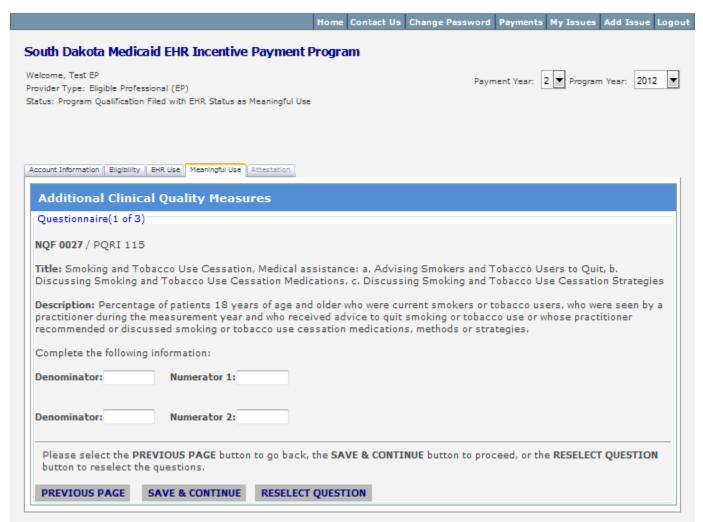
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.7 Additional Clinical Quality Measure 7 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

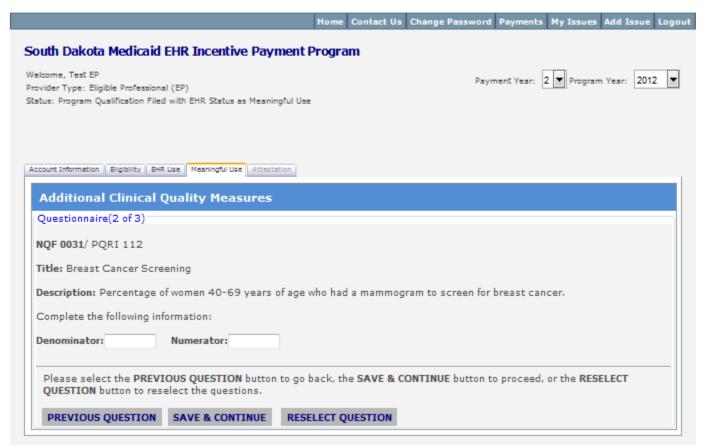
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.8 Additional Clinical Quality Measure 8 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

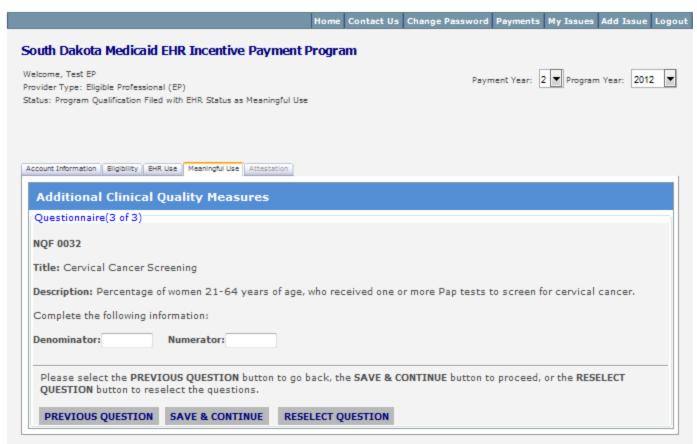
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a denominator, 0 is acceptable if there is no measure population.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.9 Additional Clinical Quality Measure 9 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

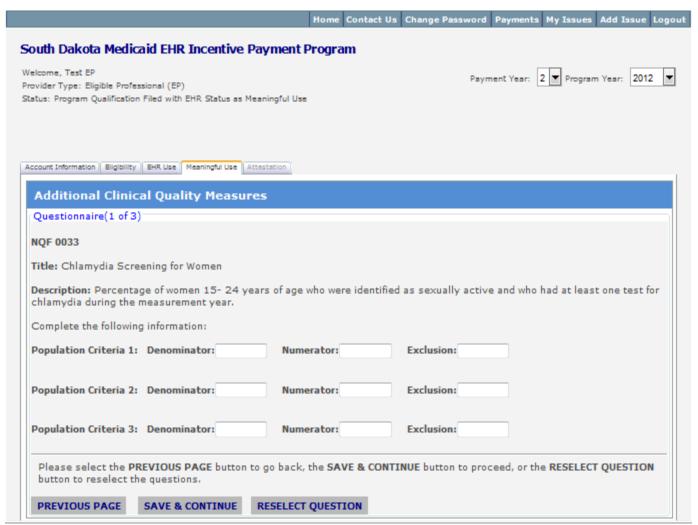
- Please enter a numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\circ$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.10 Additional Clinical Quality Measure 10 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

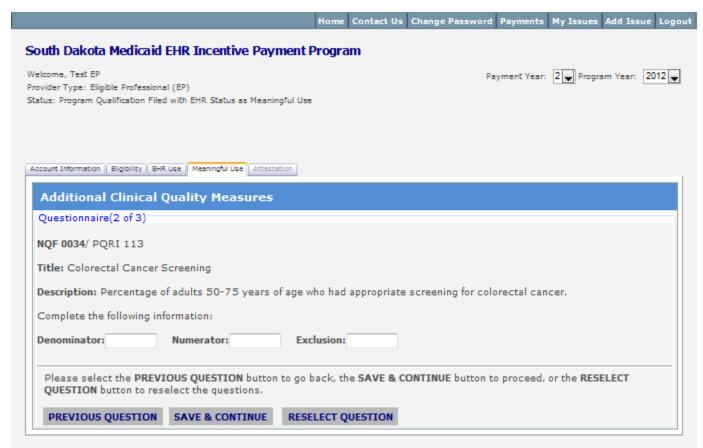
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.11 Additional Clinical Quality Measure 11 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.12 Additional Clinical Quality Measure 12 Screen





Hom	e Contact Us Change Password Payments My Issues Add Issue Logout
South Dakota Medicaid EHR Incentive Payment Progr	ram
Welcome, Test EP Provider Type: Eligible Professional (EP) Status: Program Qualification Filed with EHR Status as Meaningful Use	Payment Year: 2 Program Year: 2012
Account Information   Bligibility   BHR Use   Meaningful Use   Attestation    Additional Clinical Quality Measures	
NQF 0036	
	were identified as having persistent asthma and were appropriately three age stratifications (5-11 years, 12-50 years, and total).
Complete the following information:	
Population Criteria 1: Denominator: Numerator	Exclusion:
Population Criteria 2: Denominator: Numerator	Exclusion:
Population Criteria 3: Denominator: Numerator	Exclusion:
Please select the PREVIOUS QUESTION button to go back, QUESTION button to reselect the questions.	the SAVE & CONTINUE button to proceed, or the RESELECT
PREVIOUS QUESTION SAVE & CONTINUE RESELECT	QUESTION

All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

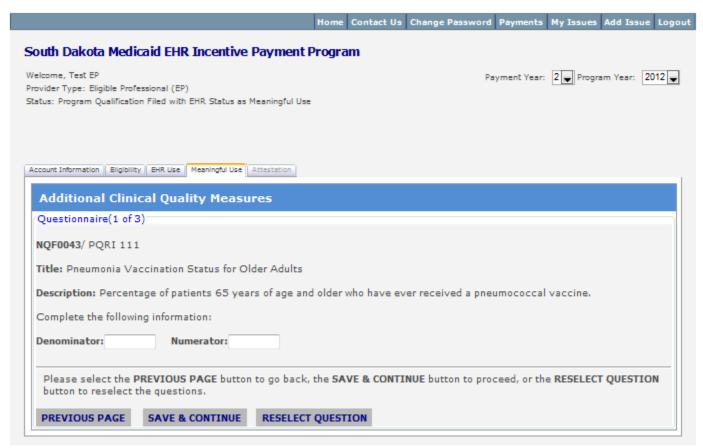
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator.
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.13 Additional Clinical Quality Measure 13 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

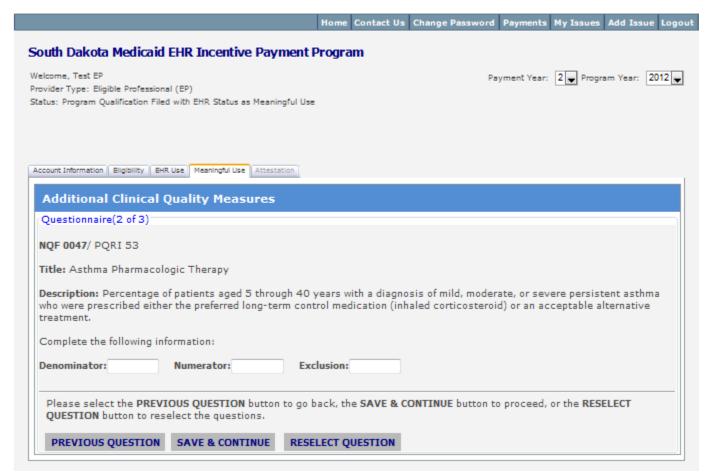
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.14 Additional Clinical Quality Measure 14 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

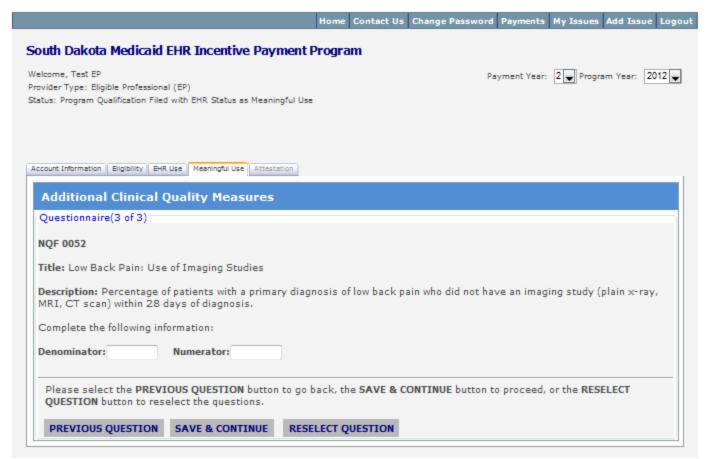
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- The Numerator should be less than or equal to the Denominator.
- Exclusion must be greater than or equal to 0.
- Please provide a whole number less than 1,000,000 for the Exclusion.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.15 Additional Clinical Quality Measure 15 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

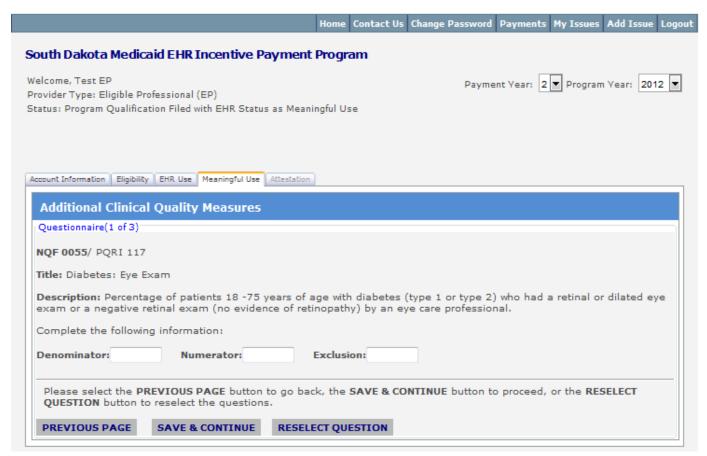
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.16 Additional Clinical Quality Measure 16 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

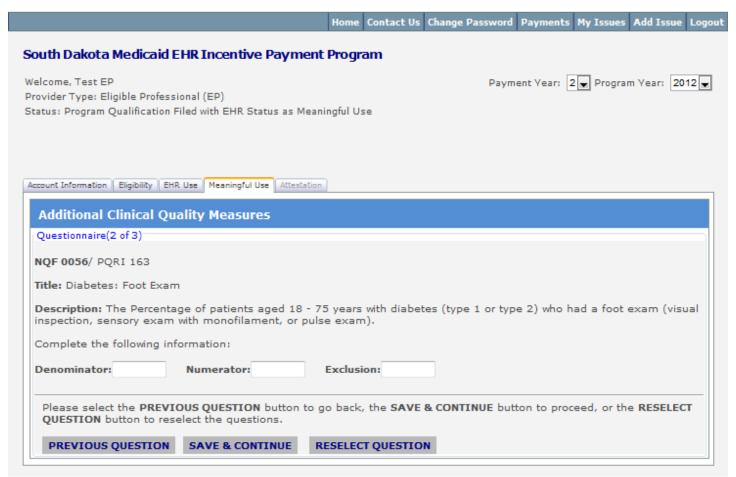
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator.  $\bigcirc$
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.17 Additional Clinical Quality Measure 17 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

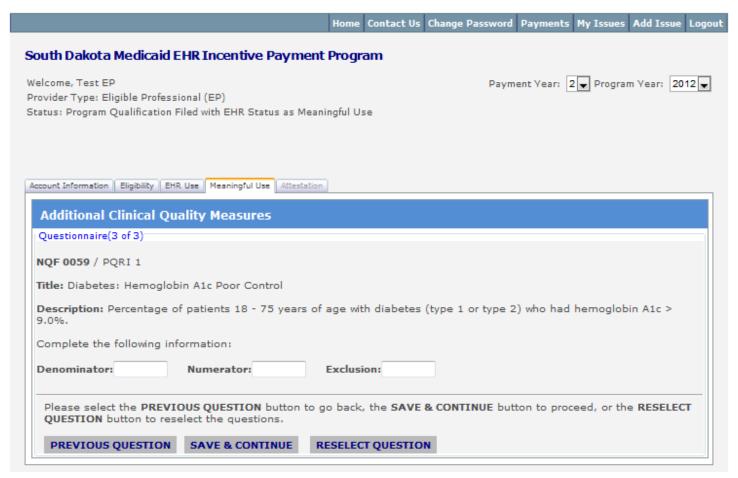
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.18 Additional Clinical Quality Measure 18 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

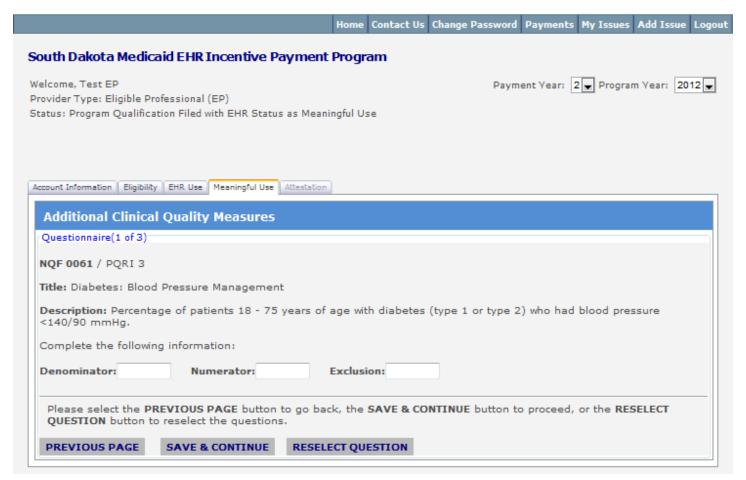
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- The Numerator should be less than or equal to the Denominator.
- Exclusion must be greater than or equal to 0.
- Please provide a whole number less than 1,000,000 for the Exclusion.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.19 Additional Clinical Quality Measure 19 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

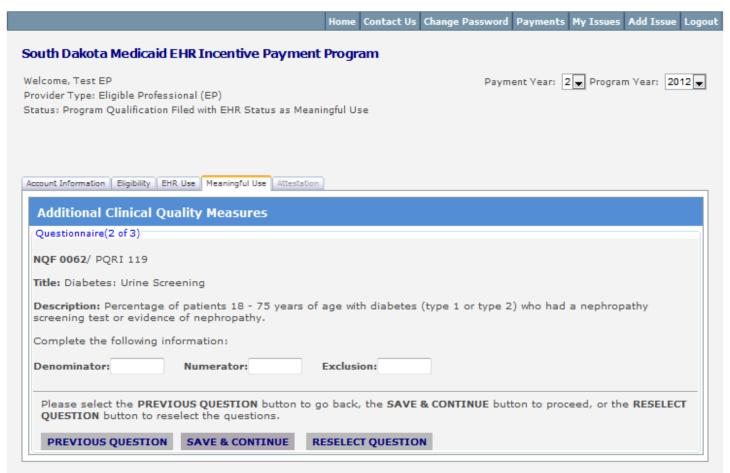
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.  $\bigcirc$
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.  $\circ$

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.20 Additional Clinical Quality Measure 20 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

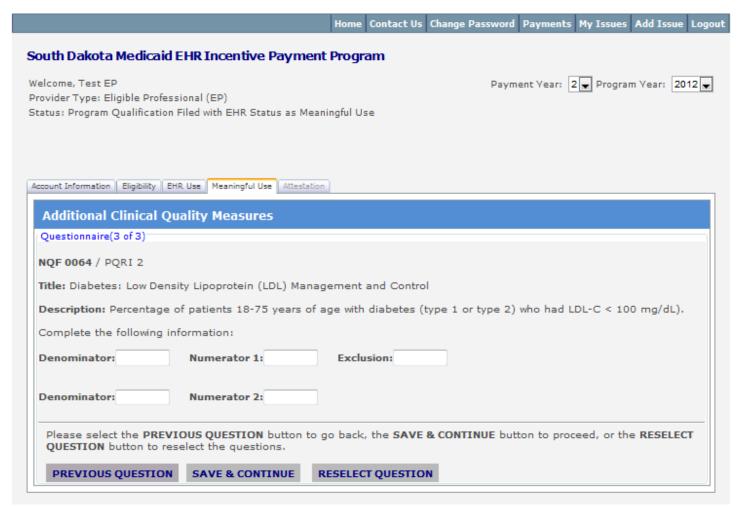
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$
- Exclusion must be greater than or equal to 0. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.  $\bigcirc$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.21 Additional Clinical Quality Measure 21 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

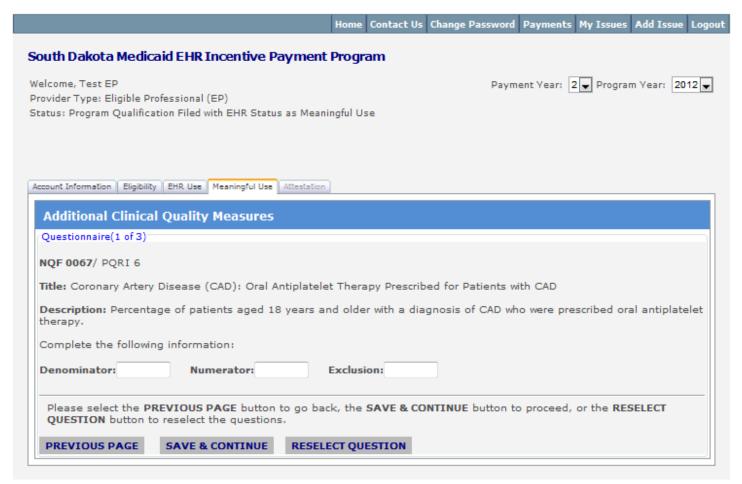
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter exclusion, 0 is acceptable if that was reported by the EHR technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.22 Additional Clinical Quality Measure 22 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

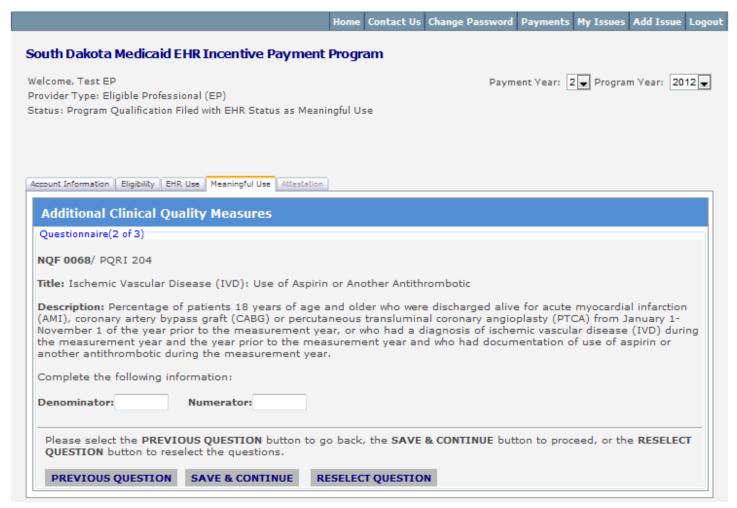
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.23 Additional Clinical Quality Measure 23 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

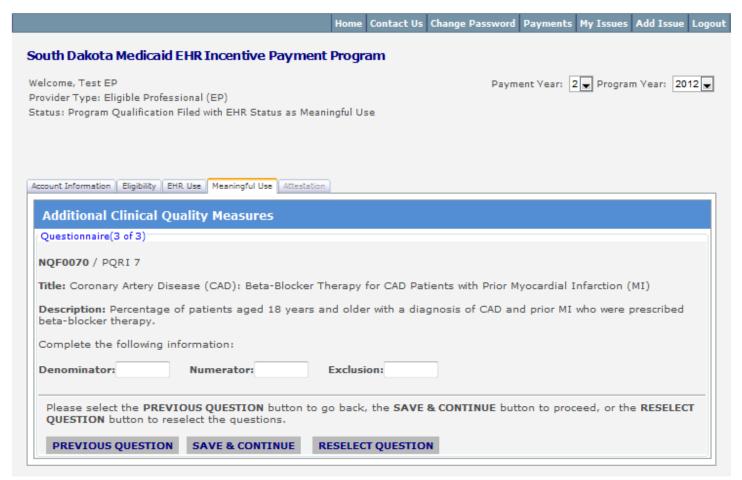
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.24 Additional Clinical Quality Measure 24 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

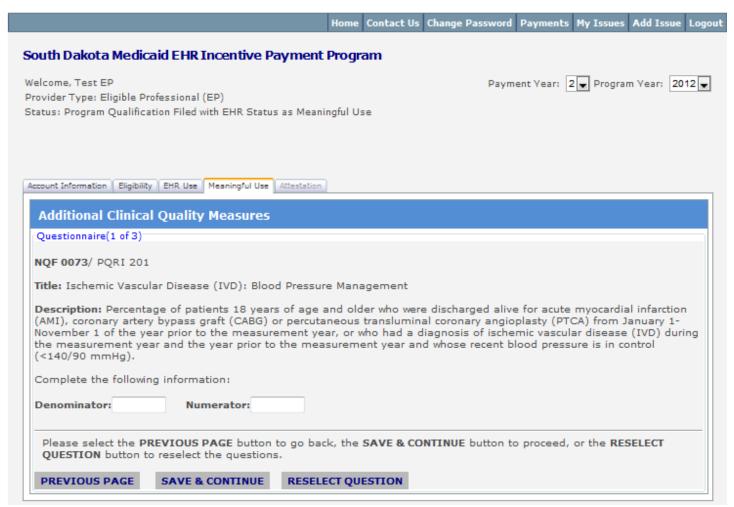
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- Please provide a whole number less than 1,000,000 for the Exclusion.
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.25 Additional Clinical Quality Measure 25 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

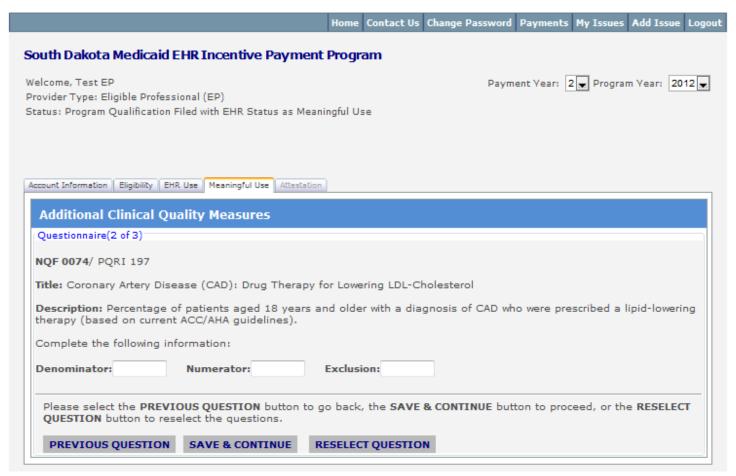
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.26 Additional Clinical Quality Measure 26 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

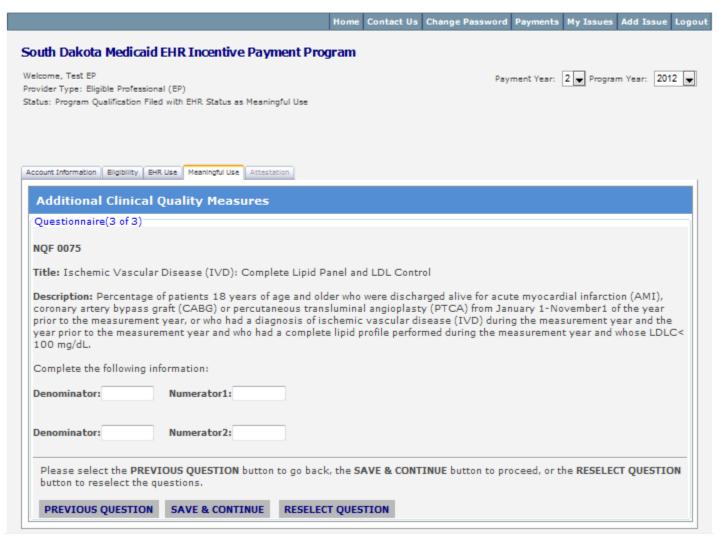
- 0 Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\circ$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.  $\circ$
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.27 Additional Clinical Quality Measure 27 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

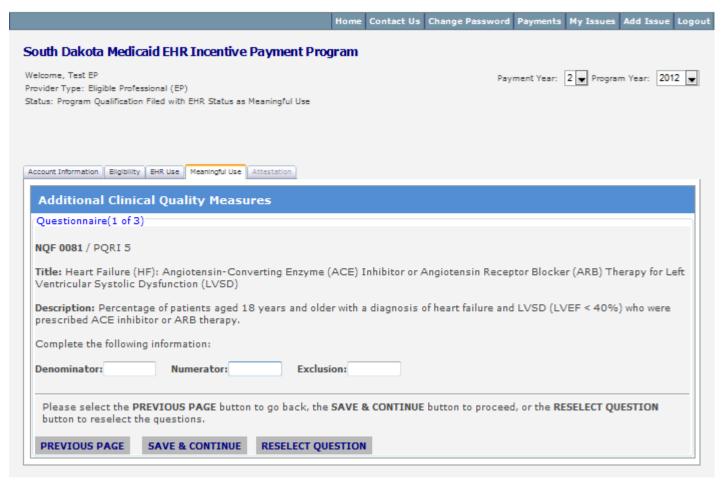
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- 0 The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.28 Additional Clinical Quality Measure 28 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

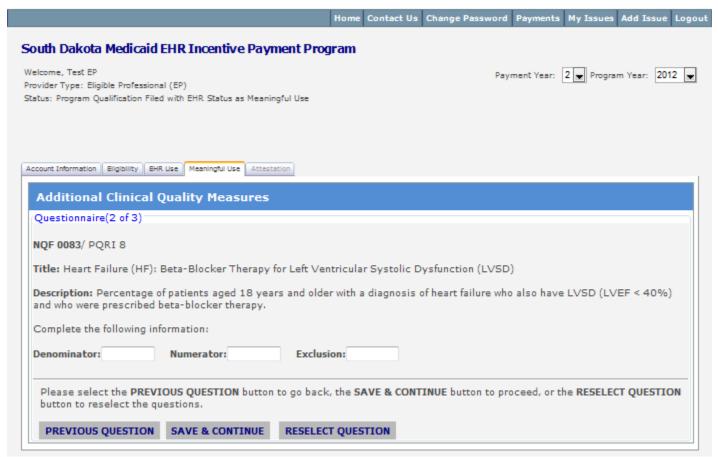
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.
- Please enter a Denominator, 0 is acceptable if there is no measure population.
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology.
- Please provide a whole number less than 1,000,000 for the Denominator.
- Please provide a whole number less than 1,000,000 for the Numerator.
- Please provide a whole number less than 1,000,000 for the Exclusion.
- The Numerator should be less than or equal to the Denominator.

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.29 Additional Clinical Quality Measure 29 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

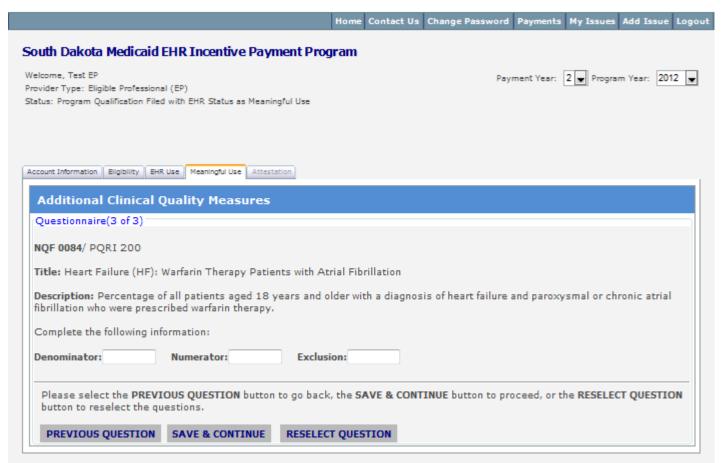
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.30 Additional Clinical Quality Measure 30 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator.  $\cap$
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.31 Additional Clinical Quality Measure 31 Screen





	Home	Contact Us	Change Password	Payments My	Issues	Add Issue	Logou		
South Dakota Medicaid EHR Incentive Payment Program									
Welcome, Test EP Provider Type: Eligible Professional (EP) Status: Program Qualification Filed with EHR Status as Meani	ngful U:	5e	Payme	nt Year: 2 🔻 A	Program	Year: 201	12 🔻		
Account Information   Eligibility   EHR Use   Meaningful Use   Attestation  Additional Clinical Quality Measures									
Questionnaire(1 of 3)									
NOF 0086/ PORI 12									
Title: Primary Open Angle Glaucoma (POAG): Optic No	erve Ev	aluation							
Description: Percentage of patients aged 18 years at two office visits who have an optic nerve head evalua-	nd olde	r with a dia				for at leas	t		
Complete the following information:			_						
Denominator: Numerator:	Exclusi	ion:							
Please select the PREVIOUS PAGE button to go bac QUESTION button to reselect the questions.  PREVIOUS PAGE SAVE & CONTINUE RESELECTION RES		SAVE & CO	NTINUE button to	proceed, or t	the RES	SELECT			

All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

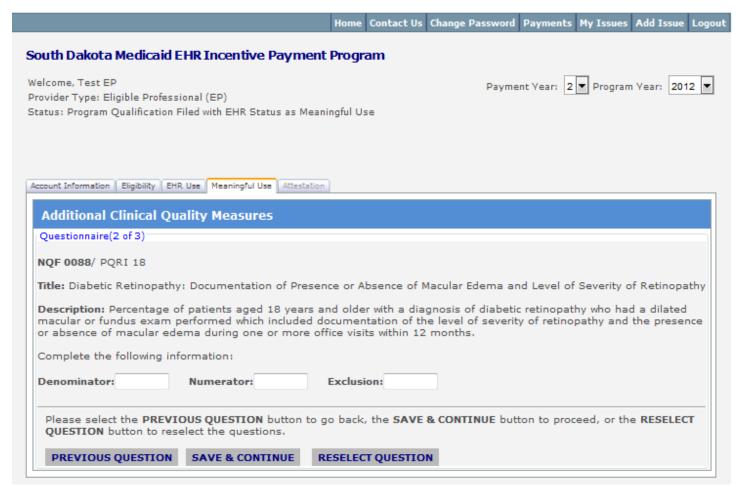
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.32 Additional Clinical Quality Measure 32 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

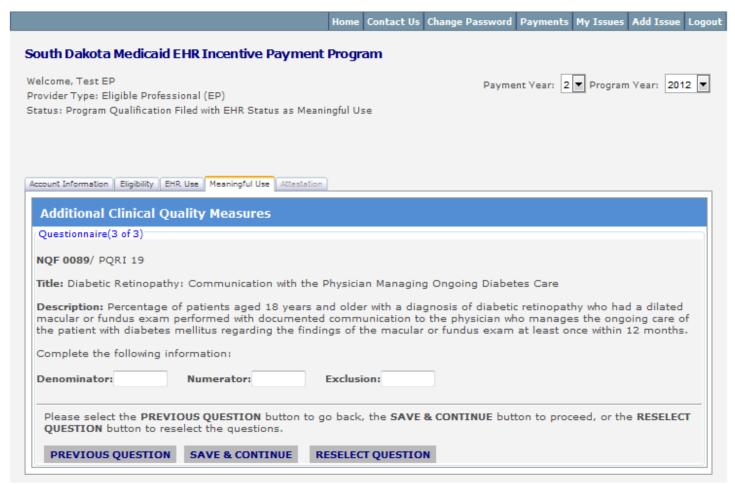
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology.
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator.  $\cap$
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.33 Additional Clinical Quality Measure 33 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

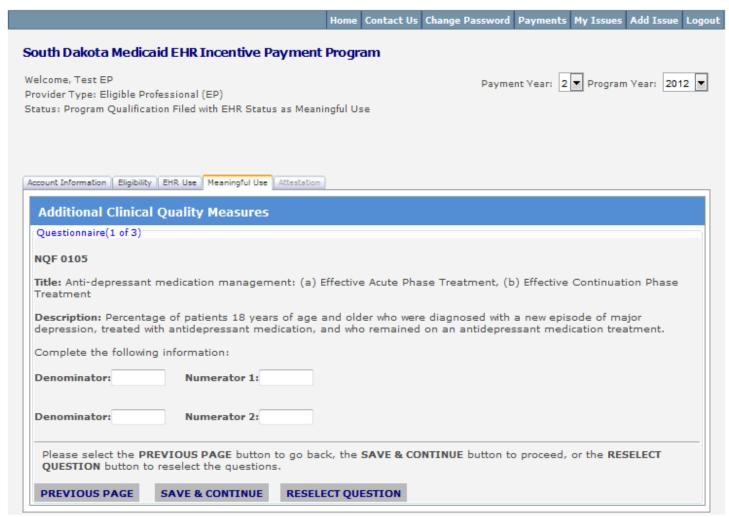
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.  $\bigcirc$
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.34 Additional Clinical Quality Measure 34 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

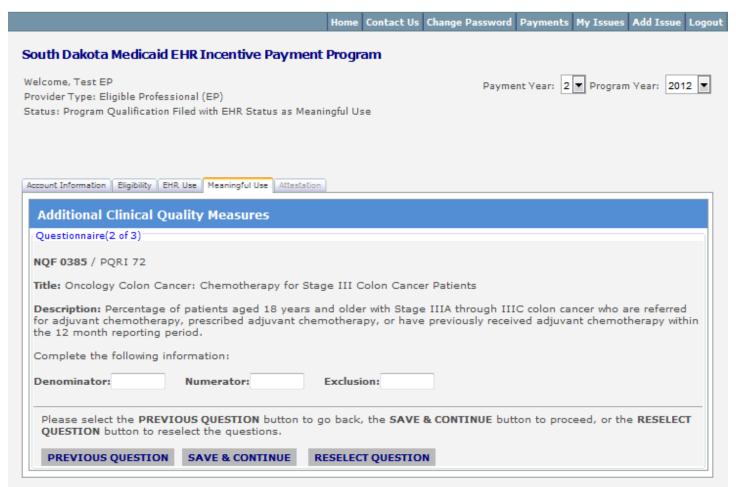
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology.  $\bigcirc$
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Page" prior to saving will result in the data on the current Screen not being saved.

# 7.26.35 Additional Clinical Quality Measure 35 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

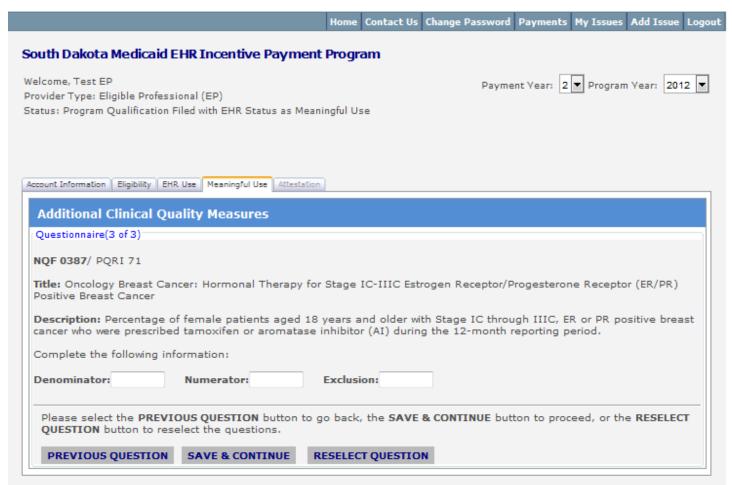
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator.  $\bigcirc$

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.36 Additional Clinical Quality Measure 36 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion.  $\cap$
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.37 Additional Clinical Quality Measure 37 Screen





	Home	Contact Us	Change Password	Payments	My Issues	Add Issue	Logout			
South Dakota Medicaid EHR Incentive Payment Program										
Welcome, Test EP Provider Type: Eligible Professional (EP) Status: Program Qualification Filed with EHR S	Status as Meaningful Us	5 <b>e</b>	Payme	ent Year: 2	▼ Program	Year: 201	2 🔻			
Account Information   Eligibility   EHR Use   Meaningful	Use Attestation									
Additional Clinical Quality Measu	res									
Questionnaire(2 of 3)										
NQF 0389 / PQRI 102										
Title: Prostate Cancer: Avoidance of Ove	eruse of Bone Scan f	or Staging	Low Risk Prostate	Cancer Pa	atients					
Description: Percentage of patients, regreceiving interstitial prostate brachythers OR cryotherapy who did not have a bone Complete the following information:	apy, OR external bea	am radiothe	erapy to the prost	tate, OR ra	dical prost					
Denominator: Numerator:	Exclusi	on:								
Please select the PREVIOUS QUESTION QUESTION button to reselect the ques		, the SAVE	& CONTINUE but	ton to proc	eed, or the	e RESELEC	т			
PREVIOUS QUESTION SAVE & CO	NTINUE RESELEC	T QUESTIO	N							

All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

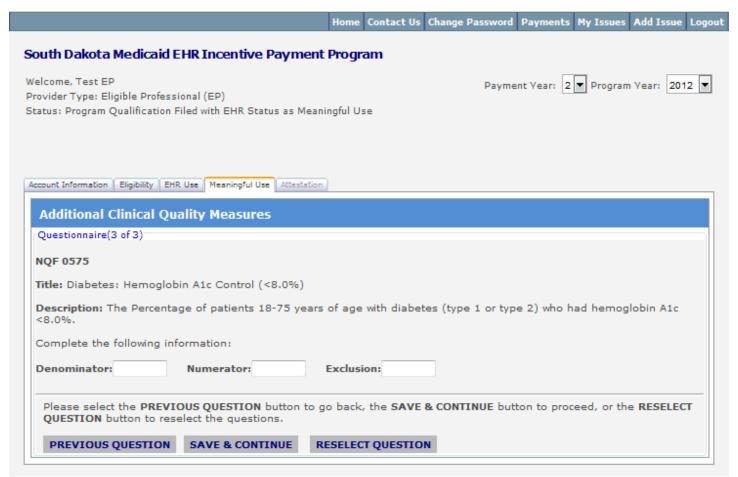
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator. 0
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.38 Additional Clinical Quality Measure 38 Screen







All fields must be entered to continue to the next measure screen. The responses entered must be reported from your certified EHR reporting for the EHR reporting period even if the report states zero. The following details are other requirements of this screen:

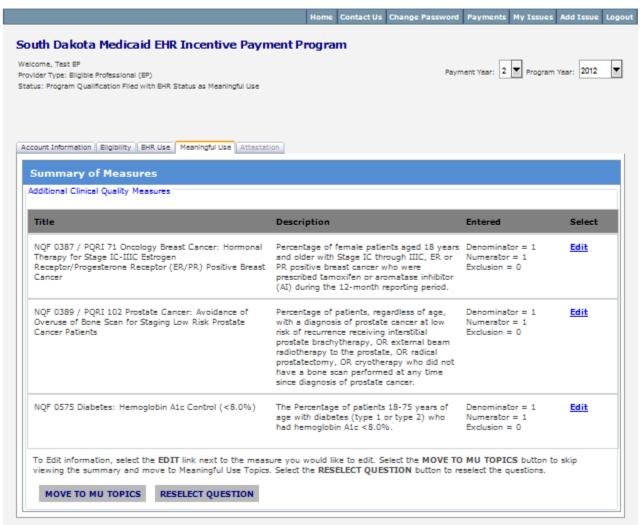
- Please enter a Numerator, 0 is acceptable if that was reported by the EHR technology. 0
- Please enter a Denominator, 0 is acceptable if there is no measure population. 0
- Please enter an exclusion, 0 is acceptable if that was reported by the HER technology. 0
- Please provide a whole number less than 1,000,000 for the Denominator.  $\bigcirc$
- Please provide a whole number less than 1,000,000 for the Numerator. 0
- Please provide a whole number less than 1,000,000 for the Exclusion. 0
- The Numerator should be less than or equal to the Denominator. 0

Please note that selecting "Previous Question" prior to saving will result in the data on the current Screen not being saved.

# 7.26.39 Summary of Measures





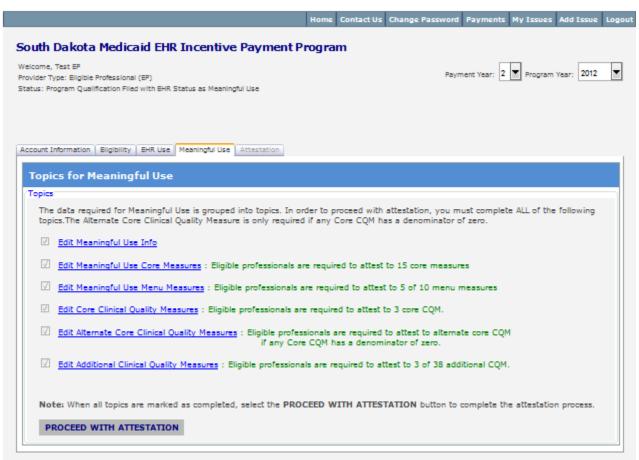


The EP can review the Additional Clinical Quality Measures. To Edit the information, select the EDIT link next to the measure to edit. Select the MOVE TO MU TOPICS button to skip viewing the summary and move to Meaningful Use Topics. Select Alternative Core Clinical Quality Measures.

# 7.27 Topics for Meaningful Use



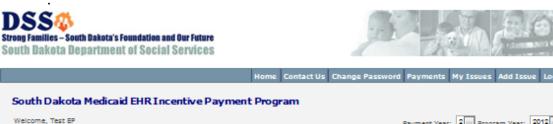


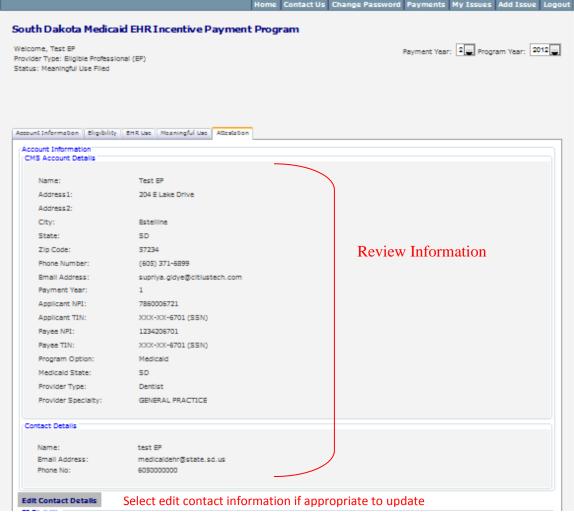


The EP may update any field on the measure that they have previously entered. By clicking on the blue hyperlinks of the measures, the measures can be reviewed and updated. If the EP decides they do not want to make any changes then they can select the 'Proceed with Attestation' button to continue.

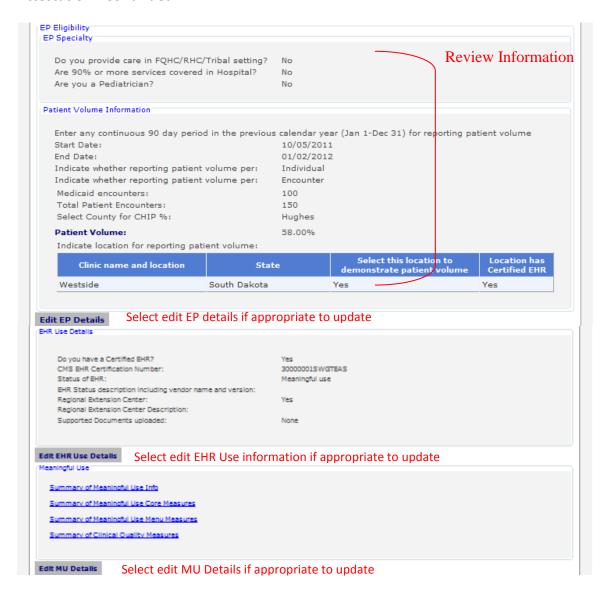
#### 8. Attestation

Edit information entered and save if necessary. Confirm and submit. Once submitted, the provider will not be able to update or change the attested

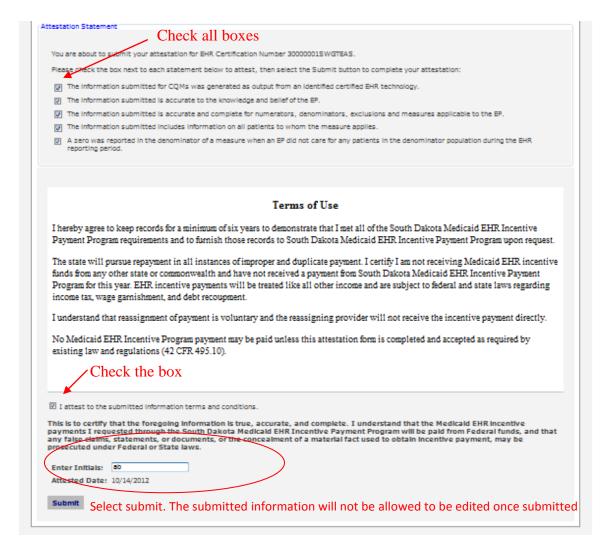




#### **Attestation - Continued**



#### Attestation - Continued



Please closely review the Terms of Use and check the box if you agree to the terms and conditions.

Enter your initials, click submit and the current date will be populated.

After attestation, program staff will review the submission and will be in contact with you. If you have questions, please call 605-773-3495 or email Medicaidehr@state.sd.us.

Thank you! Angie Bren, Program Manager